

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Keep the Promise PAC

ADDRESS (number and street) ▼

PO Box 92225

☐ Check if different than previously reported. (ACC)

Austin

TX

78709

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00575415

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☒ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

02

01

2016

02

29

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dathan Voelter

Signature of Treasurer

Dathan Voelter

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

09

29

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Keep the Promise PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 02 / 01 / 2016

To:

 M M / D D / Y Y Y Y Y  
 02 / 29 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		1365078.18
(b) Cash on Hand at Beginning of Reporting Period.....	1165262.28	
(c) Total Receipts (from Line 19) .....	680067.13	1792974.13
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1845329.41	3158052.31
7. Total Disbursements (from Line 31) .....	945694.61	2258417.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	899634.80	899634.80
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	64962.06	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Keep the Promise PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
02 01 2016

To:

M M / D D / Y Y Y Y  
02 29 2016
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

540394.70

1593164.08

(ii) Unitemized .....

109672.43

115313.43

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

650067.13

1708477.51

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

25000.00

25000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ►

675067.13

1733477.51

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

5000.00

59496.62

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ..... ►

680067.13

1792974.13

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ►

680067.13

1792974.13

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	773418.14	1299622.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	773418.14	1299622.27
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	172236.47	958755.24
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	40.00	40.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	40.00	40.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	945694.61	2258417.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	945694.61	2258417.51

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	675067.13	1733477.51
34. Total Contribution Refunds (from Line 28(d)) .....	40.00	40.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	675027.13	1733437.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	773418.14	1299622.27
37. Offsets to Operating Expenditures (from Line 15, page 3).....	5000.00	59496.62
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	768418.14	1240125.65

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Ken Mann**

Mailing Address 3747 Berry Drive

City	State	Zip Code
Studio City	CA	91604-3855

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CoverX Insurance Sercives

Occupation

Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	01	/	2016

**Transaction ID : AA8553D4C0A684E7AB80**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Scott Banister**

Mailing Address PO Box 997

City	State	Zip Code
Half Moon Bay	CA	94019-0997

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Angel investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	02	/	2016

**Transaction ID : A1DC72900CF2647058F7**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Scott Banister**

Mailing Address PO Box 997

City	State	Zip Code
Half Moon Bay	CA	94019-0997

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Angel investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	06	/	2016

**Transaction ID : AE965D27F21974189846**

Amount of Each Receipt this Period

10000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

## **A. Catherine Tulman**

Mailing Address 2625 Winston Ct. N.

City  
Columbus

State  
OH

Zip Code  
43235-2817

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 08 / 2016

**Transaction ID : A19BB1928F849495780E**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Carl Parson**

Mailing Address 30355 S 4239 Rd

City  
Inola

State  
OK

Zip Code  
74036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2016

**Transaction ID : AEB52F0FF4F6A4F2FBC8**

Amount of Each Receipt this Period

825.00

☐ Memo Item

In-kind:Newspaper Advertising

Full Name (Last, First, Middle Initial)

## **C. K3 Development LLC**

Mailing Address 300 Brickstone Square #201

City  
Andover

State  
MA

Zip Code  
01810-1497

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

MM / DD / YYYY  
02 / 09 / 2016

**Transaction ID : AD689FCBEC5C64A589D2**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

26325.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

<b>A. Thomas H. Patrick</b> Full Name (Last, First, Middle Initial) Mailing Address 9723 Niblick Lane City Naples State FL Zip Code 34108-1925 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer New Vernon Capital Occupation Investment Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 50000.00		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 10 / 2016 <b>Transaction ID : A957E5E8A6FB246F0B87</b> Amount of Each Receipt this Period 50000.00 <input type="checkbox"/> Memo Item
<b>B. Steven F. Hotze</b> Full Name (Last, First, Middle Initial) Mailing Address 20214 Braidwood Ste 215 City Katy State TX Zip Code 77450-2140 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hotze HWC Occupation Health & Wellness Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 10 / 2016 <b>Transaction ID : A141CBA1E2F6C48E681E</b> Amount of Each Receipt this Period 5000.00 <input type="checkbox"/> Memo Item
<b>C. David Bartrand</b> Full Name (Last, First, Middle Initial) Mailing Address POB A1 City Beverly State WA Zip Code 99321-0157 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 12 / 2016 <b>Transaction ID : A307D2984E0B347E7B8B</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		55250.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶		



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Donna Ecton**

Mailing Address 5602 E Via Buena Vista

City

Paradise Valley

State

AZ

Zip Code

85253-8129

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EEI Inc.

Occupation

Consultant

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	1	6

**Transaction ID : A449103A2B5554FBD93C**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Donna Ecton**

Mailing Address 5602 E Via Buena Vista

City

Paradise Valley

State

AZ

Zip Code

85253-8129

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EEI Inc.

Occupation

Consultant

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	1	6

**Transaction ID : AC046EE3DF069413FB34**

Amount of Each Receipt this Period

900.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Will Rabon**

Mailing Address 828 Indian Wood Lane

City

Myrtle Beach

State

SC

Zip Code

29588-6948

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	1	6

**Transaction ID : A699ECA2E502441F199D**

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Keep the Promise PAC

Full Name (Last, First, Middle Initial)

### A. Daniel Perrier

Mailing Address 5910 NW 204th Circle

City State Zip Code  
Ridgefield WA 98642-9554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ACSI

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2016

Transaction ID : A81C3E5A29F7B4397B8A

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### B. Karen Kim

Mailing Address 1316 Wilmington Island Road

City State Zip Code  
Savannah GA 31410-4513

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2016

Transaction ID : AA23A2596496646EBA88

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### C. Michelle Marceau

Mailing Address PO Box 197, Spofford, NH

City State Zip Code  
Spofford NH 03462-0197

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NetJets

Occupation

pilot

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
02 / 16 / 2016

Transaction ID : A49596ED925D840AEB28

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 132

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

## **A. AIMC, LLC**

Mailing Address 220 Cinema Way

City State Zip Code  
 Woodstock GA 30189-4900

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 16 / 2016

**Transaction ID : A533F7983699E4BA3A43**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Wendy Kolokotronis**

Mailing Address PO Box 1449

City State Zip Code  
 La Canada Flintridge CA 91012-5449

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2016

**Transaction ID : A97348A279E9B44DAAC6**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Ernest Angelo, Jr.**

Mailing Address 410 N Main

City State Zip Code  
 Midland TX 79701-4710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self Employed

Petroleum Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2016

**Transaction ID : A41D36F35BC5E44499F7**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

111000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

## **A. Ken Kormanis**

Mailing Address 5938 Bostonian Drive

City

Greensboro

State

NC

Zip Code

27455-8418

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Inospine LLC

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2016

**Transaction ID : A81FA9A2B2F2846E7B24**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Kara Unger**

Mailing Address 12988 Knights Way

City

Fishers

State

IN

Zip Code

46037-7217

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2016

**Transaction ID : A8B168DFDBC224863AA8**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Herzog Contracting Corp**

Mailing Address PO Box 1089

City

Saint Joseph

State

MO

Zip Code

64502-1089

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

61619.38

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 19 / 2016

**Transaction ID : AA97347946BD745C88DE**

Amount of Each Receipt this Period

41000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

41500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

<p>Full Name (Last, First, Middle Initial)  <b>A. Susan Bartlett</b></p> <p>Mailing Address 2600 Helmsley Ct</p> <p>City State Zip Code          Midlothian VA 23113-6497</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          Self Employed Information Requested</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>		<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">02 / 22 / 2016</span></p> <p><b>Transaction ID : A6945D9F66149492A9E4</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p> <p><input type="checkbox"/> Memo Item</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. roberto silva</b></p> <p>Mailing Address 14432 rudi kuefner</p> <p>City State Zip Code          El Paso TX 79928-7417</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          Self Employed retail</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>		<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">02 / 22 / 2016</span></p> <p><b>Transaction ID : A24406981018A408F99C</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p><input type="checkbox"/> Memo Item</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. roberto silva</b></p> <p>Mailing Address 14432 rudi kuefner</p> <p>City State Zip Code          El Paso TX 79928-7417</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          Self Employed retail</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>		<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">02 / 22 / 2016</span></p> <p><b>Transaction ID : ABC266E9711E04DE9B3F</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p><input type="checkbox"/> Memo Item</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		<p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">1000.00</span></p>

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

Full Name (Last, First, Middle Initial) <b>A. Gregg Horowitz</b>			Date of Receipt MM / DD / YYYY 02 / 22 / 2016	
Mailing Address P.O. Box 2927			Transaction ID : <b>A58693B65C4FC4E5A852</b>	
City Sarasota	State FL	Zip Code 34230-2927	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item		
Name of Employer Self Employed		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Merl O'Brien</b>			Date of Receipt MM / DD / YYYY 02 / 22 / 2016	
Mailing Address 5233 Loop Rd, Loma Rica, CA			Transaction ID : <b>AFF98D817AA8B403E912</b>	
City Marysville	State CA	Zip Code 95901-9598	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item		
Name of Employer Self Employed		Occupation Physicians		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Brad Hearon</b>			Date of Receipt MM / DD / YYYY 02 / 22 / 2016	
Mailing Address 7205 CR 328			Transaction ID : <b>A776DA52CFE5A4EC79FF</b>	
City Westcliffe	State CO	Zip Code 81252-9642	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item		
Name of Employer Self Employed		Occupation Evangelist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

## **A. Ryan Rathje**

Mailing Address 3225 N Westwind Bay Ct

City State Zip Code  
Wichita KS 67205-2525

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Tiger Finacial

Occupation

Chief Marketing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 22 2016

**Transaction ID : ADEE2D2EE0635416BA76**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. David Marriott**

Mailing Address 2023 Lincoln

City State Zip Code  
Salt Lake City UT 84124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Spectra Symbol Corp

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 22 2016

**Transaction ID : AA7E8C37C89CD4B35A62**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. SUSIE ALESHIRE**

Mailing Address 4930 SW 198 TERR

City State Zip Code  
Southwest Ranches FL 33332-1130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DEBONAIR

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 22 2016

**Transaction ID : ADD1E46AF348745D495F**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

<p>Full Name (Last, First, Middle Initial)  <b>A. Jimmiesue Combs</b></p> <p>Mailing Address PO Box 575</p> <p>City Camas State WA Zip Code 98607-0575</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Small Business Owner Occupation Painting Contractor</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  02 / 22 / 2016  <b>Transaction ID : A559B2D770199489F9C6</b></p> <p>Amount of Each Receipt this Period  500.00</p> <p><input type="checkbox"/> Memo Item</p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. Vernon Munson</b></p> <p>Mailing Address P.O.Box 505</p> <p>City Fort Stockton State TX Zip Code 79735-0505</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Sandridge Energy Occupation Lease operator</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 999.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  02 / 22 / 2016  <b>Transaction ID : A789D059052A842B6A2B</b></p> <p>Amount of Each Receipt this Period  999.00</p> <p><input type="checkbox"/> Memo Item</p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. Vicki Keen</b></p> <p>Mailing Address 481 N Strata Via Way</p> <p>City Boise State ID Zip Code 83712-6730</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer None Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  02 / 22 / 2016  <b>Transaction ID : A44C8A0C68D0C4181A74</b></p> <p>Amount of Each Receipt this Period  500.00</p> <p><input type="checkbox"/> Memo Item</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>1999.00</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

## **A. Nathan Frame**

Mailing Address 4589 Warwick cir

City State Zip Code  
 Oceanside CA 92056-4917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

USMC

Occupation

Military Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 22 2016

**Transaction ID : A4815890467F542969A4**

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Heath Miller**

Mailing Address 444 Pittsburgh Pike

City State Zip Code  
 Ruffs Dale PA 15679-1436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EHC Industries

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 22 2016

**Transaction ID : A6E4790DF2BC544EAAA9**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Yvonne Webb**

Mailing Address 11286 hey 381

City State Zip Code  
 England AR 72046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Arkansas baptist

Occupation

Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 22 2016

**Transaction ID : AF0304C463A0C42BFA71**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

## **A. Sharon Bostic**

Mailing Address 6139 Satterfield Way

City State Zip Code  
 Chino CA 91710-6964

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 22 2016

**Transaction ID : A747DB2D70F584614B73**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. JoAn Leddy**

Mailing Address 610 w. 4th st.

City State Zip Code  
 Phoenix OR 97535-5711

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 22 2016

**Transaction ID : A8CB11D2060934DD4936**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Michelle Snyder**

Mailing Address 1791 Sand Creek Dr

City State Zip Code  
 Prosper TX 75078-9738

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 22 2016

**Transaction ID : AE1520E65F1644171931**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

<b>A. Martha Todd</b> Full Name (Last, First, Middle Initial) Mailing Address 3470 Summit Trail City Cumming State GA Zip Code 30041-6694 FEC ID number of contributing federal political committee. C Name of Employer None Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 23 / 2016 <b>Transaction ID : AF7A3E2D905DB497BAC8</b> Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Memo Item
<b>B. Hon. Suzanne Hudgens</b> Full Name (Last, First, Middle Initial) Mailing Address 6509 Hwy 106 South City Hull State GA Zip Code 30646-2702 FEC ID number of contributing federal political committee. C Name of Employer None Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 23 / 2016 <b>Transaction ID : A02F343115CF14962B10</b> Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Memo Item
<b>C. Joe Glenn</b> Full Name (Last, First, Middle Initial) Mailing Address 932 Henley Pl. City Charlotte State NC Zip Code 28207-1618 FEC ID number of contributing federal political committee. C Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 23 / 2016 <b>Transaction ID : A08BC239CEDB74293A2F</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		4250.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶		

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

Full Name (Last, First, Middle Initial) <b>A. Johan van Zuylen</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 23 / 2016 <b>Transaction ID : A0F5C0F737E3F47E58EB</b>		
Mailing Address P.O. Box 235			Amount of Each Receipt this Period 300.00		
City Pocomoke City	State MD	Zip Code 21851-0235	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 300.00		
Name of Employer None		Occupation Retired	<input type="checkbox"/> Memo Item		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			
Full Name (Last, First, Middle Initial) <b>B. William Dow</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 23 / 2016 <b>Transaction ID : AB8B3C7B270454F28AA9</b>		
Mailing Address 1000 Highland Gate Court			Amount of Each Receipt this Period 250.00		
City Hoover	State AL	Zip Code 35244-4168	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 250.00		
Name of Employer Danieli Taranis		Occupation Engineer	<input type="checkbox"/> Memo Item		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) <b>C. Eric Hamilton</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 23 / 2016 <b>Transaction ID : A69EEB94C54D24802964</b>		
Mailing Address 14868 Links Pond Cir			Amount of Each Receipt this Period 1600.00		
City Gainesville	State VA	Zip Code 20155-4838	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 1600.00		
Name of Employer Northrop Grumman		Occupation Software Engineer	<input type="checkbox"/> Memo Item		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1600.00			
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			2150.00		
<b>TOTAL</b> This Period (last page this line number only)..... ▶					

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Philip Zieber**

Mailing Address 3050 Wendton Place

City

Marietta

State

GA

Zip Code

30062-1475

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Delta Air Lines

Occupation

Aviation Maintenance Technician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2016

**Transaction ID : AD7092EF4D6EC47AF992**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHRIS PUCKETT**

Mailing Address 314 SW 29th ST

City

Oklahoma City

State

OK

Zip Code

73109-6723

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Towing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2016

**Transaction ID : ADD48E77A0D3A439E9ED**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Michele M. Mosbacher**

Mailing Address 3262 Westheimer Rd #654

City

Houston

State

TX

Zip Code

77098-1002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 23 / 2016

**Transaction ID : A27C780E123B24F1CBAB**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

Full Name (Last, First, Middle Initial) <b>A. State Mutual Insurance Co.</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>02 / 23 / 2016</div> </div>	
Mailing Address 210 E 2nd Ave Ste. 301			<b>Transaction ID : AFDA2BFAF36EE4484B15</b>	
City Rome	State GA	Zip Code 30161-1714	Amount of Each Receipt this Period <div> <div>20000.00</div> </div>	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item		
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>20000.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>B. BRAD FETROW</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>02 / 24 / 2016</div> </div>	
Mailing Address 141 SALEM CHURCH ROAD			<b>Transaction ID : AF7881C2AB7D2493A919</b>	
City Mechanicsburg	State PA	Zip Code 17050-2835	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item		
Name of Employer FETROW ELECTRIC SERVICE COMPANY		Occupation ELECTRICIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>c. Carolyn Vollrath</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>02 / 24 / 2016</div> </div>	
Mailing Address 10413 Fox Borough Ct.			<b>Transaction ID : A099FB572F0884CCCAFC</b>	
City Oakdale	State CA	Zip Code 95361-7622	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item		
Name of Employer None		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

20500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 132

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

Full Name (Last, First, Middle Initial) <b>A. Wendy Snell</b>			Date of Receipt MM / DD / YYYY 02 / 24 / 2016 <b>Transaction ID : A3D8DD6E660444189938</b>	
Mailing Address 2 Thornblade Ct			Amount of Each Receipt this Period 1000.00	
City Durham	State NC	Zip Code 27712-8914	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer None	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Bruce McGehe</b>			Date of Receipt MM / DD / YYYY 02 / 25 / 2016 <b>Transaction ID : AE75BD332706442A19C1</b>	
Mailing Address 11331 Elk Horn Street			Amount of Each Receipt this Period 500.00	
City Norwalk	State IA	Zip Code 50211-9568	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer None	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Eric Johnson</b>			Date of Receipt MM / DD / YYYY 02 / 25 / 2016 <b>Transaction ID : A4C30345020A24A418A5</b>	
Mailing Address 837 S Park Trail Dr			Amount of Each Receipt this Period 500.00	
City Carmel	State IN	Zip Code 46032-4219	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer None	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

## **A. Gerald Myers**

Mailing Address 224 Cardinal Ridge Rd

City State Zip Code  
 Thomasville GA 31792-8842

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2016

**Transaction ID : A5FCB0BED2A7E4BC9B6I**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Clifton Eldred**

Mailing Address 5623 Sunnyview Rd NE

City State Zip Code  
 Salem OR 97305-3266

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2016

**Transaction ID : A299DF012F344400392E**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Traci Brown**

Mailing Address 49 Habersham Cove Dr NW

City State Zip Code  
 Atlanta GA 30305-5402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2016

**Transaction ID : A4DE15BD5FDC0471E95F**

Amount of Each Receipt this Period

300.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1300.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Debbie Daniel**

Mailing Address 11108 Honeycutt Road

City	State	Zip Code
Raleigh	NC	27614-9679

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	1	6

**Transaction ID : AE0910ABE64A646038F6**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Kenneth Quarnberg**

Mailing Address 5901 Carter Ave.

City	State	Zip Code
Bakersfield	CA	93308-2939

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Valley Gun, Inc.

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	1	6

**Transaction ID : A8AFD0877DE524FA384A**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Roy Hernandez**

Mailing Address 8603 Sonora Pass

City	State	Zip Code
Helotes	TX	78023-4354

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

ADT Security

Technician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	1	6

**Transaction ID : AD627BFBCB47F4174A0C**

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 132

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Cynthia Straus-Strul**

Mailing Address 9833 NW 13th Court

City

Coral Springs

State

FL

Zip Code

33071-5922

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Guarantee Insurance Company

Occupation

Accounts Payable Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 25 / 2016

Transaction ID : A79CE2AA7FDB443999EA

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Karen Westover**

Mailing Address 1496 N Harvard Ave

City

Washington

State

UT

Zip Code

84780-8540

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

02 / 25 / 2016

Transaction ID : A734EEE3766724F2BB2F

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Joseph Jonas**

Mailing Address 305 Applebriar Lane

City

Marlborough

State

MA

Zip Code

01752-4675

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

02 / 25 / 2016

Transaction ID : A0D50A65DB69849DBA6E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

4000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Terry Fredrickson**

Mailing Address 2302 Colt Road

City	State	Zip Code
Rancho Palos Verdes	CA	90275-6502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	1	6

**Transaction ID : A7DDDF94887224F52B62**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Ken Embry**

Mailing Address 209 Hilltop Road

City	State	Zip Code
Bowling Green	KY	42101-9232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	1	6

**Transaction ID : A9D154985211D426F942**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Shannon Meller**

Mailing Address R.R. 71, Box 90

City	State	Zip Code
Quincy	MO	65735-9712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	1	6

**Transaction ID : A4E9FD824C8F5414DA0B**

Amount of Each Receipt this Period

300.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

800.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 132

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Suzanne Ogle**

Mailing Address 1010 Bear Canyon Rd.

City	State	Zip Code
Bozeman	MT	59715-6635

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	1	6

**Transaction ID : A87889F1F2D0343A6A17**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. terry seltman**

Mailing Address 5351 salem road

City	State	Zip Code
Cincinnati	OH	45230-1327

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	1	6

**Transaction ID : A9660DF9CE5754283B9F**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bob Mader**

Mailing Address 308 7th St So

City	State	Zip Code
Hopkins	MN	55343-7721

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	1	6

**Transaction ID : A25EF72D727964BCD95C**

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

1050.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

## **A. Crystal Tucker**

Mailing Address 5913 Republic of Texas Blvd.

City State Zip Code  
 Austin TX 78735-6509

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2016

**Transaction ID : AE946040D81C44C47A3F**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Grayson FitzHugh**

Mailing Address 6921 Glen Ellyn Dr

City State Zip Code  
 Loveland OH 45140-9496

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2016

**Transaction ID : AA21077A434C044E59F3**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Laura Zulueta**

Mailing Address 2008 Greyhawk Place

City State Zip Code  
 Apex NC 27539-9309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2016

**Transaction ID : A90FDB485F10D42629D9**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Laura Lyford**

Mailing Address 2657 W. Riverview Ct.

City State Zip Code  
Nixa MO 65714-8902

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 25 2016

**Transaction ID : AEC4920A99C1E47FA8A9**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Doris Redfern**

Mailing Address Four Greenwich Drive

City State Zip Code  
Midland TX 79705-6418

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 25 2016

**Transaction ID : A23676A3B550A44948EF**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Susan Dyer**

Mailing Address PO Box 399

City State Zip Code  
Saratoga WY 82331-0399

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 25 2016

**Transaction ID : A3F9EB629F20B4423BF2**

Amount of Each Receipt this Period

250.70

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1550.70

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

## **A. Diana Jaeger**

Mailing Address 7345 Post and Rail Ln, Cincinnati

City State Zip Code  
 Cincinnati OH 45243-1450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2016

**Transaction ID : A689FBE783C4545D5B4A**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Mark Werner**

Mailing Address 3257 Candlewick Ct.

City State Zip Code  
 The Villages FL 32163-2410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2016

**Transaction ID : A2AE364FF11E64648821**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Dave Cook**

Mailing Address 270 Cal Dobson Trl

City State Zip Code  
 Greeneville TN 37743-4767

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2016

**Transaction ID : A51302644E27D4FA2B18**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1750.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

### A. Patricia McEwen

Mailing Address 11 Sable Hts.

City State Zip Code  
San Antonio TX 78258-4858

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2016

Transaction ID : A1E953ED42D724734B86

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### B. Clark Glave

Mailing Address 2019 W Grace Street

City State Zip Code  
Richmond VA 23220-2003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2016

Transaction ID : AF79A1BBDC84848CAAC9

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### C. John J. Redfern, IV

Mailing Address 3208 Hidalgo

City State Zip Code  
Richardson TX 75082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2016

Transaction ID : A40FEF352F9754206920

Amount of Each Receipt this Period

3000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3750.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Aaron Hayek**

Mailing Address 4825 Soundside Dr

City

Gulf Breeze

State

FL

Zip Code

32563-8917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Information Requested

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	1	6

**Transaction ID : A694E157567A2467283B**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LAYNE JENSEN**

Mailing Address PO BOX 1028

City

Thatcher

State

AZ

Zip Code

85552-1028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Self employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	1	6

**Transaction ID : A85F981F4F2DF4CBA16**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. charles saunders**

Mailing Address 1030 roseland ln.

City

Gadsden

State

AL

Zip Code

35907-7054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

electronics

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	1	6

**Transaction ID : A7EF7C377E9EE4CBA97C**

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1750.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

Keep the Promise PAC

Full Name (Last, First, Middle Initial)

### A. Rickey Rau

Mailing Address 2355 Nordic Valley Way

City State Zip Code  
Eden UT 84310-6797

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self Employed

pilot

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 25 2016

Transaction ID : AA76F545799674E93B71

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### B. Michael Mcerlane

Mailing Address 3555 avenida verano

City State Zip Code  
Thousand Oaks CA 91360-6253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self Employed

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 25 2016

Transaction ID : ABF3032008E004328B80

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### C. Nancy Singletary

Mailing Address 3877 E US 27

City State Zip Code  
Mayo FL 32066-5813

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self Employed

retail

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 25 2016

Transaction ID : A117619FA8D6142BDA06

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

Full Name (Last, First, Middle Initial) <b>A. Larry Harris</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>02 / 25 / 2016</div> </div>	
Mailing Address 6231 Blue Ash Rd.			<b>Transaction ID : A71677A1FAABA4A3FB35</b>	
City Dayton	State OH	Zip Code 45414-2801	Amount of Each Receipt this Period <div> <div>150.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer F&M Express		Occupation Driver		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>B. Howard Carver</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>02 / 25 / 2016</div> </div>	
Mailing Address 1887 Lyster Ln			<b>Transaction ID : AF308148A6599478EA37</b>	
City Troy	State MI	Zip Code 48085-1415	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer General Motors		Occupation Engineering Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>C. Randall Montgomery</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>02 / 25 / 2016</div> </div>	
Mailing Address 1645 faxon ave			<b>Transaction ID : A5D1A828A347442439D5</b>	
City Memphis	State TN	Zip Code 38112-4920	Amount of Each Receipt this Period <div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Vens		Occupation Childcare		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>500.00</div> </div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

900.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

Full Name (Last, First, Middle Initial) <b>A. Franklin Blickenstaff</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>02 / 25 / 2016</div> </div>	
Mailing Address Rear 720 Carlisle St			<b>Transaction ID : AA7450C9155DD4024BF7</b>	
City Hanover	State PA	Zip Code 17331-1701	Amount of Each Receipt this Period <div> <div>300.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Auto Body Intensive Care, INC.		Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>300.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>B. Patricia Young</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>02 / 25 / 2016</div> </div>	
Mailing Address 2111 South Wynn Road			<b>Transaction ID : A01AAAD5C2B41430E9C2</b>	
City Okeana	State OH	Zip Code 45053-9308	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer T.G. Young Contracting, Inc.		Occupation Self/Office Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>C. Johnny Hall</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>02 / 25 / 2016</div> </div>	
Mailing Address Po 2220			<b>Transaction ID : AD70E4EF338554D3CA7B</b>	
City Conroe	State TX	Zip Code 77305	Amount of Each Receipt this Period <div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Superior home		Occupation Builder		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>500.00</div> </div>		

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

Full Name (Last, First, Middle Initial) <b>A. Scott Richardson</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>02 / 25 / 2016</div> </div>	
Mailing Address 20384 Pickford Way			<b>Transaction ID : A94215C7E04514583908</b>	
City Redding	State CA	Zip Code 96002-9231	Amount of Each Receipt this Period <div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer RMC Refrigeration		Occupation Business Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>500.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>B. Jeffery Nuckles</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>02 / 25 / 2016</div> </div>	
Mailing Address 760 Olivers Lane			<b>Transaction ID : A1D2D7357652F42B88F3</b>	
City Sutherlin	State VA	Zip Code 24594-2836	Amount of Each Receipt this Period <div> <div>500.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer SNW Steel Services, Inc.		Occupation Construction		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>500.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>C. Michael Struble</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>02 / 25 / 2016</div> </div>	
Mailing Address P. O. Box 163			<b>Transaction ID : A951F7184A9324FF9992</b>	
City Anthony	State KS	Zip Code 67003-0163	Amount of Each Receipt this Period <div> <div>250.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Spirit Aero		Occupation Wire mechanic		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>250.00</div> </div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

<p>Full Name (Last, First, Middle Initial) <b>A. Reatta Energy, Inc.</b></p> <p>Mailing Address 306 W Wall St Ste 1100</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Midland</td> <td style="width: 33%;">State TX</td> <td style="width: 33%;">Zip Code 79701-5173</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer</td> <td style="width: 66%;">Occupation</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">5000.00</span> </p>			City Midland	State TX	Zip Code 79701-5173	Name of Employer	Occupation	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">25</span> / <span style="border: 1px solid black; padding: 2px;">2016</span> </p> <p><b>Transaction ID : AC86EFEFCC0F44D1ABCF</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">5000.00</span> </p> <p><input type="checkbox"/> Memo Item</p>		
City Midland	State TX	Zip Code 79701-5173								
Name of Employer	Occupation									
<p>Full Name (Last, First, Middle Initial) <b>B. Pollard Lumber Co., Inc.</b></p> <p>Mailing Address 5863 Washington Rd</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Appling</td> <td style="width: 33%;">State GA</td> <td style="width: 33%;">Zip Code 30802-3000</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer</td> <td style="width: 66%;">Occupation</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">5000.00</span> </p>			City Appling	State GA	Zip Code 30802-3000	Name of Employer	Occupation	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">25</span> / <span style="border: 1px solid black; padding: 2px;">2016</span> </p> <p><b>Transaction ID : A90C10FFA1D8B4C82AB2</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">5000.00</span> </p> <p><input type="checkbox"/> Memo Item</p>		
City Appling	State GA	Zip Code 30802-3000								
Name of Employer	Occupation									
<p>Full Name (Last, First, Middle Initial) <b>C. Herzog Railroad Services</b></p> <p>Mailing Address 700 S Riverside Rd</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Saint Joseph</td> <td style="width: 33%;">State MO</td> <td style="width: 33%;">Zip Code 64507-2504</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer</td> <td style="width: 66%;">Occupation</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">150000.00</span> </p>			City Saint Joseph	State MO	Zip Code 64507-2504	Name of Employer	Occupation	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">26</span> / <span style="border: 1px solid black; padding: 2px;">2016</span> </p> <p><b>Transaction ID : AB38E29DB9DD24CE39B5</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">150000.00</span> </p> <p><input type="checkbox"/> Memo Item</p>		
City Saint Joseph	State MO	Zip Code 64507-2504								
Name of Employer	Occupation									
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">160000.00</span>							
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>							

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 132

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Keep the Promise PAC

Full Name (Last, First, Middle Initial)

**A. AIMC, LLC**

Mailing Address 220 Cinema Way

City State Zip Code  
 Woodstock GA 30189-4900

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2016

Transaction ID : A7BCFEFE37F65483983F

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Seth Boschen**

Mailing Address 1706 Palmetto Park Dr

City State Zip Code  
 Katy TX 77493-2771

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Alief ISD

Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2016

Transaction ID : AF22279884577463B8DB

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Roland Caldwell Jr**

Mailing Address 1400 Center ROad

City State Zip Code  
 Venice FL 34292-3801

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Trust Companies of America

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2016

Transaction ID : A7AA7FE6AA0C44624A7D

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

12800.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Mike Neal**

Mailing Address 12277 albano road

City	State	Zip Code
Barboursville	VA	22923-8719

FEC ID number of contributing  
federal political committee.

C

Name of Employer

America Cedar &amp; Millwork

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	1	6

**Transaction ID : A8961D5296EE343FF9CE**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Mark Taube**

Mailing Address 570 El Camino Real #150-248

City	State	Zip Code
Redwood City	CA	94063-1200

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	1	6

**Transaction ID : ADDD6F8E82C064FC7ADF**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Leanne Tawods**

Mailing Address PO BOX 3424

City	State	Zip Code
Pinetop	AZ	85935-3424

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

CRNA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	1	6

**Transaction ID : ADB92F0878D7249B1848**

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

25750.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Kelly Laskowski**

Mailing Address 707 S Emerald Dr

City

McHenry

State

IL

Zip Code

60051-9441

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bish Creative Display

Occupation

Senior Production Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

02 / 26 / 2016

Transaction ID : AAECE9C72AA43449EB8C

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. John Hutchison**

Mailing Address 201 Dakota St.

City

Barney

State

ND

Zip Code

58008-4001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sanford Health

Occupation

physician

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

02 / 26 / 2016

Transaction ID : AF313E9E0AD7A429D8D4

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Chris LoMascolo**

Mailing Address 42 North Monson road

City

Hampden

State

MA

Zip Code

01036-9654

FEC ID number of contributing  
federal political committee.

C

Name of Employer

All Waste Removal, Inc.

Occupation

Business Owner

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 26 / 2016

Transaction ID : A303559514D48417A861

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

<b>A. Michael Posey</b> Full Name (Last, First, Middle Initial) Mailing Address 3271 Sierrama Dr City Shingle Springs State CA Zip Code 95682-7604 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 <b>Transaction ID : A1C29135AF5D74951B26</b> Amount of Each Receipt this Period 300.00 <input type="checkbox"/> Memo Item		
<b>B. LyndaKay Myers</b> Full Name (Last, First, Middle Initial) Mailing Address 715 Sleepy Hollow Drive City Cedar Hill State TX Zip Code 75104-5701 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 <b>Transaction ID : A11B244B1E8FD4155BEC</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item		
<b>C. Virginia Smith</b> Full Name (Last, First, Middle Initial) Mailing Address 1437 Shortoff Rd City Highlands State NC Zip Code 28741-9173 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 26 / 2016 <b>Transaction ID : A41FFD99306E14A9A9CD</b> Amount of Each Receipt this Period 600.00 <input type="checkbox"/> Memo Item		
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1150.00		
<b>TOTAL</b> This Period (last page this line number only)..... ▶					

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

## **A. Bobby Bennett**

Mailing Address 12706 State Route 7

City  
Greenwood

State  
MO

Zip Code  
64034-9005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 26 / 2016

**Transaction ID : A103BA6ECF61F441DBB7**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Dustin Beckley**

Mailing Address 4360 Via Del Obispo

City  
Yorba Linda

State  
CA

Zip Code  
92886-3000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Manion Gaynor & Manning LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 26 / 2016

**Transaction ID : ACC94C8FAB32D46F5900**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Laura Zulueta**

Mailing Address 2008 Greyhawk Place

City  
Apex

State  
NC

Zip Code  
27539-9309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

02 / 26 / 2016

**Transaction ID : A7291912249334CCA9CE**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

<p>Full Name (Last, First, Middle Initial)  <b>A. Wendy Snell</b></p> <p>Mailing Address 2 Thornblade Ct</p> <p>City State Zip Code  Durham NC 27712-8914</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  None Retired</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  2000.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  02 26 2016  <b>Transaction ID : A90DAA290F94F4F19908</b></p> <p>Amount of Each Receipt this Period  1000.00</p> <p><input type="checkbox"/> Memo Item</p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. George Paliatsos</b></p> <p>Mailing Address PO Box 1540</p> <p>City State Zip Code  Osprey FL 34229-1540</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  None Information Requested</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  500.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  02 26 2016  <b>Transaction ID : A8F7FC0973ED74E1ABA5</b></p> <p>Amount of Each Receipt this Period  500.00</p> <p><input type="checkbox"/> Memo Item</p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. Barbara Auyang</b></p> <p>Mailing Address 3107 Sweet Briar St</p> <p>City State Zip Code  Grapevine TX 76051-2638</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  None Homemaker</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  500.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  02 27 2016  <b>Transaction ID : AA2BA318410544FCFA5A</b></p> <p>Amount of Each Receipt this Period  500.00</p> <p><input type="checkbox"/> Memo Item</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>2000.00</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Jim Evans**

Mailing Address 13809 Martha Circle

City

Omaha

State

NE

Zip Code

68144-2455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Occupation

Information Requested

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2016

**Transaction ID : A58156C0DD3034D93A03**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Brian Dougher**

Mailing Address 13810 glen acres rd sw

City

Vashon

State

WA

Zip Code

98070-3400

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Occupation

landlord

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2016

**Transaction ID : A959A3F24E3034669BC7**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Brian Howe**

Mailing Address 1925 Orchard Drive

City

Saint Paul

State

MN

Zip Code

55125-8657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Specialty Door Systems

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Occupation

President

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2016

**Transaction ID : A032AFCE0AFF14B98A5B**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

## **A. Josh Young**

Mailing Address 2517C Toll Gate Road S.E.

City State Zip Code  
Huntsville AL 35801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Huntsville Utilities

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2016

**Transaction ID : A04C9BE1BF3934D0CB8E**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Jim Evans**

Mailing Address 13809 Martha Circle

City State Zip Code  
Omaha NE 68144-2455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2016

**Transaction ID : A2A28FF36A22E4CE4A76**

Amount of Each Receipt this Period

1200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Paige Moore**

Mailing Address 10218 Olympia Drive

City State Zip Code  
Houston TX 77042-2932

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2016

**Transaction ID : A5928E644EB82469694B**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

## **A. Steven Knapp**

Mailing Address 1701 Olive Springs Rd.

City State Zip Code  
 Soquel CA 95073-9665

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Prevailing Technology

Principal Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016

**Transaction ID : A23F8DA8F26214001B67**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Mary Cox**

Mailing Address 8429 Hollow Bend Ln

City State Zip Code  
 Port Arthur TX 77642-7343

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016

**Transaction ID : AC72498D63EB94A78A90**

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Marilyn Robertson**

Mailing Address 4236 140th Ave NE

City State Zip Code  
 Bellevue WA 98005-1130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016

**Transaction ID : AC716DFF0DFB7468B973**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1650.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Mary Cox**

Mailing Address 8429 Hollow Bend Ln

City

Port Arthur

State

TX

Zip Code

77642-7343

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2		2	9		2	0	1	6		

**Transaction ID : AC761D93B1555485DB1F**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jonathan Lenters**

Mailing Address 2810 Templeton Gap Rd

City

Colorado Springs

State

CO

Zip Code

80907-6429

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Transocean Offshore Inc

Occupation

vessel Master

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2		2	9		2	0	1	6		

**Transaction ID : A28FCFDD6FF5946AFBF2**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jennifer Pennings**

Mailing Address 1011 Appaloosa Trail

City

Racine

State

WI

Zip Code

53402-2196

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Regency office products

Occupation

Clerical

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2		2	9		2	0	1	6		

**Transaction ID : AD2AFE4CCFCB24DFAB78**

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

850.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 49 OF 132

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Keep the Promise PAC

Full Name (Last, First, Middle Initial)

A. R.W. Hatcher

Mailing Address 424 Watroak Lane

City

Augusta

State

GA

Zip Code

30907-9545

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

02 / 29 / 2016

Transaction ID : A2F6B3764C3C94C2E884

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Josh Young

Mailing Address 2517C Toll Gate Road S.E.

City

Huntsville

State

AL

Zip Code

35801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Huntsville Utilities

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

02 / 29 / 2016

Transaction ID : A4E75B9E699C84A749C1

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bridget Ann Wong

Mailing Address 8321 Fullmoon Maple Ave

City

Las Vegas

State

NV

Zip Code

89117-1895

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Home maker

Occupation

Self

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 29 / 2016

Transaction ID : A937B559B95924C1F8ED

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5520.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 OF 132

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Keep the Promise PAC

Full Name (Last, First, Middle Initial)

### A. Dale Declare

Mailing Address hc 6 box 280

City

Doniphan

State

MO

Zip Code

63935-9011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

leclare powersports

Occupation

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 29 / 2016

Transaction ID : A3FEC15E45383472D8A0

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### B. Pamela Baker

Mailing Address 16705 Butteville Rd, NE

City

Woodburn

State

OR

Zip Code

97071-8415

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Semi-retired

Occupation

self-employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 29 / 2016

Transaction ID : A47AA2B47ECEA48FB8A6

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

### C. Cary Strickland

Mailing Address 2700 Shady Hill Ct

City

Grapevine

State

TX

Zip Code

76051-7119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Southwest Airlines

Occupation

pilot

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 29 / 2016

Transaction ID : A38EF12B79C644D4EAAD

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

540394.70

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 132

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Keep the Promise PAC

Full Name (Last, First, Middle Initial)

A. MADISON PROJECT INC.

Mailing Address PO BOX 655

City	State	Zip Code
ALEDO	TX	76008

FEC ID number of contributing federal political committee.

C C00298000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
02	/	23	/	2016

Transaction ID : A02B6E5A6BEC3459FA2D

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
-------	---	-------	---	-------------------

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
-------	---	-------	---	-------------------

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25000.00

25000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 52 OF 132

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

## **A. Alabama GOP**

Mailing Address 3505 Lorna Rd

City  
Birmingham

State Zip Code  
AL 35216-5901

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**02** / **18** / **2016**

**Transaction ID : A86D7FDAE37EB498DB36**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5000.00

5000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Carl Parson**

Mailing Address 30355 S 4239 Rd

City	State	Zip Code
Inola	OK	74036

Purpose of Disbursement  
In-kind:Newspaper Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	09	/	2016

**Transaction ID : BEB52F0FF4F6A4F2FBC8**

Amount of Each Disbursement this Period

825.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Duck Commander**

Mailing Address 117 Kings Lane

City	State	Zip Code
West Monroe	LA	71292-9430

Purpose of Disbursement  
PAC Promotional Items

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	01	/	2016

**Transaction ID : B66ACD1DCCC9D4DE08A!**

Amount of Each Disbursement this Period

1500.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Melissa Terra**

Mailing Address 102 Banville Ave

City	State	Zip Code
Somerset	MA	02726-4601

Purpose of Disbursement  
Grassroots Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	01	/	2016

**Transaction ID : B89B8995C434A4B5795F**

Amount of Each Disbursement this Period

3000.00
---------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5325.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Ground Game Strategies**

Mailing Address 300 Hickory Lane

City	State	Zip Code
Mauldin	SC	29662-2238

Purpose of Disbursement  
PAC Voter ID Program

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		01		2016

**Transaction ID : B3851D1F2619545ED99D**

Amount of Each Disbursement this Period

88841.00
----------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Mary Lou Daxland**

Mailing Address 102 Banville Ave

City	State	Zip Code
Somerset	MA	02726-4601

Purpose of Disbursement  
Grassroots Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		01		2016

**Transaction ID : BA46DE089768D49DE9E3**

Amount of Each Disbursement this Period

1161.29
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. David Steinhof**

Mailing Address 4144 N Main St

City	State	Zip Code
Fall River	MA	02720-1659

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		01		2016

**Transaction ID : BC46E4714AB0D4096848**

Amount of Each Disbursement this Period

800.00
--------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

90802.29
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. John Griffin**

Mailing Address 1511 La Don Drive

City	State	Zip Code
Bossier City	LA	71111-5313

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	02	/	2016

Transaction ID : B84D4F07364154A868EA

Amount of Each Disbursement this Period

2500.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Faith Baptist Bible College**

Mailing Address 1900 NW Fourth St

City	State	Zip Code
Ankeny	IA	50023-2152

Purpose of Disbursement  
Event Facility Rental

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	03	/	2016

Transaction ID : B13AA6CFCDCEA42C6A3E

Amount of Each Disbursement this Period

1211.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bold Colors**

Mailing Address 3125 Tiger Run Court Ste 111

City	State	Zip Code
Carlsbad	CA	92010-6516

Purpose of Disbursement  
PAC Fundraising Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	04	/	2016

Transaction ID : BCDFE47243D0446AD8B3

Amount of Each Disbursement this Period

50000.00
----------

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

53711.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 56 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Cross Strategies**

Mailing Address 13819 Oak Bend Dr

City	State	Zip Code
Baker	LA	70714-4201

Purpose of Disbursement  
Strategy Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2016

**Transaction ID : BCCD3CE2533D141A7A85**

Amount of Each Disbursement this Period

8343.44
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Estuary Motion Studios**

Mailing Address 1440 Walnut St #201

City	State	Zip Code
Des Moines	IA	50309-3406

Purpose of Disbursement  
Video Production

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2016

**Transaction ID : BD03BC026DC3748AC868**

Amount of Each Disbursement this Period

1800.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. A3K Advertising**

Mailing Address 1101 Wayland Dr

City	State	Zip Code
Arlington	TX	76012-2042

Purpose of Disbursement  
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2016

**Transaction ID : B10084F79DE03482FB61**

Amount of Each Disbursement this Period

1840.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11983.44
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. J. Summa Marketing & Communications**

Mailing Address 1532 Tournament Club Way

City	State	Zip Code
Polk City	IA	50226-1226

Purpose of Disbursement  
PAC Marketing

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2016

**Transaction ID : BF52DCB57922245CAA1A**

Amount of Each Disbursement this Period

2625.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Susanna Dokupil**

Mailing Address 9109 Hilldale St

City	State	Zip Code
Houston	TX	77055-7425

Purpose of Disbursement  
Reimbursement for Travel

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2016

**Transaction ID : B7D1201320AE641E3A8D**

Amount of Each Disbursement this Period

2946.34
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. City of Ankeny**

Mailing Address 410 W 1st St

City	State	Zip Code
Ankeny	IA	50023-1557

Purpose of Disbursement  
Event Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2016

**Transaction ID : B6F6365B6BC844185911**

Amount of Each Disbursement this Period

960.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6531.34
---------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. 365 Strategies**

Mailing Address 1001 Congress Ste 350

City	State	Zip Code
Austin	TX	78701-5006

Purpose of Disbursement  
Strategy Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2016

**Transaction ID : B79F88A70C260406BA07**

Amount of Each Disbursement this Period

12500.00
----------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Polling Company**

Mailing Address 400 North Capitol St NW Ste 790

City	State	Zip Code
Washington	DC	20001-1560

Purpose of Disbursement  
Polling

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2016

**Transaction ID : BBF265474E86F4CC5B46**

Amount of Each Disbursement this Period

22743.50
----------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Five Points Consulting**

Mailing Address 6173 Roaring Forks Dr

City	State	Zip Code
Norton Shores	MI	49444-5979

Purpose of Disbursement  
Strategy Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2016

**Transaction ID : BC5972E7945064A1E86B**

Amount of Each Disbursement this Period

13575.08
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

48818.58
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Light This Production**

Mailing Address 3115 99th Street

City	State	Zip Code
Urbandale	IA	50322-3824

Purpose of Disbursement  
Video Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2016

**Transaction ID : BA5A686EC25244D52B2B**

Amount of Each Disbursement this Period

8163.77
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KES Productions**

Mailing Address 2105 Clark St

City	State	Zip Code
Sioux City	IA	51104-3239

Purpose of Disbursement  
Video Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2016

**Transaction ID : B280B65EA2E5D4336867**

Amount of Each Disbursement this Period

1647.80
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. P+R Productions**

Mailing Address 9109 Hilldale St

City	State	Zip Code
Houston	TX	77055-7425

Purpose of Disbursement  
Video Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2016

**Transaction ID : B1A98D3B89248484BB28**

Amount of Each Disbursement this Period

6750.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

16561.57
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Left Hand Design**

Mailing Address 7233 Manchaca Rd #37

City Austin	State TX	Zip Code 78745-5293
----------------	-------------	------------------------

Purpose of Disbursement  
PAC Graphic Design

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2016

**Transaction ID : B3C06C694FD684767A46**

Amount of Each Disbursement this Period

2531.57
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Robert Edwards**

Mailing Address 1633 Winston St

City Florence	State AL	Zip Code 35630-2715
------------------	-------------	------------------------

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2016

**Transaction ID : BCAC533CBB68B410D897**

Amount of Each Disbursement this Period

3000.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Campbell Smith**

Mailing Address 1117 10th St NW #1105

City Washington	State DC	Zip Code 20001-6411
--------------------	-------------	------------------------

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2016

**Transaction ID : B779DFCACE45640509A8**

Amount of Each Disbursement this Period

10052.80
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15584.37

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Kristoffer Shafer**

Mailing Address 3628 Kelvin Ave

City	State	Zip Code
Fort Worth	TX	76133-4211

Purpose of Disbursement  
Grassroots Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2016

**Transaction ID : B44427D747949B6B06**

Amount of Each Disbursement this Period

636.93
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Christopher Drensek**

Mailing Address 103 Moonshadow Cir

City	State	Zip Code
Huntsville	AL	35811-8690

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		09		2016

**Transaction ID : B9FFE6DF2B52C45E8BEE**

Amount of Each Disbursement this Period

205.38
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kimberly Glass**

Mailing Address 116 County Road 737

City	State	Zip Code
Scottsboro	AL	35768-6616

Purpose of Disbursement  
GOTV Calls

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		09		2016

**Transaction ID : BC327CB08AAEA409DA52**

Amount of Each Disbursement this Period

803.70
--------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1646.01

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 62 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Jets.com**

Mailing Address 2 Rector Street #2104

City	State	Zip Code
New York	NY	10006-1893

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		09		2016

**Transaction ID : BDFE2C68E9B7C43628A9**

Amount of Each Disbursement this Period

25805.30
----------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Professional Data Services, Inc.**

Mailing Address 824 S Milledge Ave Ste 101

City	State	Zip Code
Athens	GA	30605-1332

Purpose of Disbursement  
Compliance Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		09		2016

**Transaction ID : B1201BFB8FA87415D8D7**

Amount of Each Disbursement this Period

5153.09
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Dunhill International**

Mailing Address 6400 Congress Ave Ste 1750

City	State	Zip Code
Boca Raton	FL	33487-2898

Purpose of Disbursement  
PAC Voter List

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2016

**Transaction ID : B5428E86C26434949887**

Amount of Each Disbursement this Period

18250.00
----------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

49208.39
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Bucky Carlton**

Mailing Address 2048 Cahaba Creest Dr

City	State	Zip Code
Birmingham	AL	35242-4417

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2016

**Transaction ID : B37FD63B7C00F4D03A1C**

Amount of Each Disbursement this Period

634.32
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bill Stewart**

Mailing Address 1214 South 10th Street (Rear)

City	State	Zip Code
Gadsden	AL	35901-5022

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2016

**Transaction ID : B7B949D035FDA4207947**

Amount of Each Disbursement this Period

811.77
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Christopher Drensek**

Mailing Address 103 Moonshadow Cir

City	State	Zip Code
Huntsville	AL	35811-8690

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2016

**Transaction ID : B26315D9764FF4CFCA46**

Amount of Each Disbursement this Period

127.44
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1573.53
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 64 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Bradley Burget**

Mailing Address 4415 Chisholm Rd Apt D4

City Florence	State AL	Zip Code 35630-7333
------------------	-------------	------------------------

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2016

**Transaction ID : B6BCFABF29E274BFFAC2**

Amount of Each Disbursement this Period

243.83
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bradley Netherton**

Mailing Address 1633 Winston St

City Florence	State AL	Zip Code 35630-2715
------------------	-------------	------------------------

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2016

**Transaction ID : BDAED207BB2C840A3887**

Amount of Each Disbursement this Period

224.79
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Christopher Warren**

Mailing Address 1633 Winston St

City Florence	State AL	Zip Code 35630-2715
------------------	-------------	------------------------

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2016

**Transaction ID : B64CC59515B914B57BE7**

Amount of Each Disbursement this Period

373.83
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

842.45



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 65 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address PO Box 15284

City  
WilmingtonState  
DEZip Code  
19850-5284Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		15		2016

**Transaction ID : B9D1E0D16D127483F8E6**

Amount of Each Disbursement this Period

383.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Ground Game Strategies**

Mailing Address 300 Hickory Lane

City  
MauldinState  
SCZip Code  
29662-2238Purpose of Disbursement  
PAC Voter ID Program

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		16		2016

**Transaction ID : BCD5A421C8787452F8EC**

Amount of Each Disbursement this Period

108529.74
-----------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jonathan Davis**

Mailing Address 12562 N Lake Shore Dr

City  
WalkerState  
LAZip Code  
70785-8210Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		16		2016

**Transaction ID : B6FA57B1ABEE248A1A8A**

Amount of Each Disbursement this Period

1250.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110162.74
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<b>X</b>	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484	485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	52
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Ashton Kirkpatrick**

Mailing Address 1223 Sharlo Ave

City	State	Zip Code
Baton Rouge	LA	70820-4547

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2016

**Transaction ID : B7D0CED3A0E0A464FBAE**

Amount of Each Disbursement this Period

375.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jacob Joffran**

Mailing Address 1200 Robley Dr Apt. 7302

City	State	Zip Code
Lafayette	LA	70503-5513

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2016

**Transaction ID : BFF91B700E0DA45169C8**

Amount of Each Disbursement this Period

250.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Sarah Anderson**

Mailing Address 6229 Green Meadow Rd

City	State	Zip Code
Shreveport	LA	71107-8790

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2016

**Transaction ID : B32982E5A7270449B947**

Amount of Each Disbursement this Period

350.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

975.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 68 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Greg Willis**

Mailing Address 9908 Stratmore Circle

City

Shreveport

State

LA

Zip Code

71115-3120

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	16	/	2016

**Transaction ID : B349825F3A3444E459D9**

Amount of Each Disbursement this Period

500.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Rachel Howard**

Mailing Address 2700 Ambassador Caffery Apt 55

City

Lafayette

State

LA

Zip Code

70506-5932

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	16	/	2016

**Transaction ID : BFCC1FB498C1E4CF9AAF**

Amount of Each Disbursement this Period

250.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Dillon Rogers**

Mailing Address 1511 La Don Dr

City

Bossier City

State

LA

Zip Code

71111-5313

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	16	/	2016

**Transaction ID : BE2E8A1668F9841518D6**

Amount of Each Disbursement this Period

308.00
--------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1058.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Andrew Ivey**

Mailing Address 9410 Overwood Dr

City	State	Zip Code
Breaux Bridge	LA	70517

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		16		2016

**Transaction ID : BD22D3213C39942FBB62**

Amount of Each Disbursement this Period

93.75
-------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jake Morrison**

Mailing Address 2911 Centenary Blvd #622

City	State	Zip Code
Shreveport	LA	71104-3335

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		16		2016

**Transaction ID : BBA4EDC07B0BA494B9A3**

Amount of Each Disbursement this Period

250.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Christopher Davis**

Mailing Address 12562 N Lake Shre Dr

City	State	Zip Code
Walker	LA	70785-8210

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		16		2016

**Transaction ID : BD3AFDAF692134B44A7F**

Amount of Each Disbursement this Period

518.75
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

862.50
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 70 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. John Hobgood**

Mailing Address 349 Albany Ave

City

Shreveport

State

LA

Zip Code

71105-2001

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2016

**Transaction ID : B1373065B03AE4A7C9FD**

Amount of Each Disbursement this Period

125.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Elizabeth Hodges**

Mailing Address 204 Paissais St

City

Folsom

State

LA

Zip Code

70437-5534

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2016

**Transaction ID : B2BC12A582EF649F980E**

Amount of Each Disbursement this Period

500.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Maggie Babcock**

Mailing Address 13600 Quail Run Ave

City

Denham Springs

State

LA

Zip Code

70726-5955

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2016

**Transaction ID : BAD41C61AC41D4C8182E**

Amount of Each Disbursement this Period

375.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Dakota West**

Mailing Address 2911 Centenary Blvd #424

City

Shreveport

State

LA

Zip Code

71104-3335

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		16		2016

**Transaction ID : BFAF79D535DF84E29B5D**

Amount of Each Disbursement this Period

250.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Joshua Gilmore**

Mailing Address 29471 Joyce St

City

Walker

State

LA

Zip Code

70785-8022

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		16		2016

**Transaction ID : B13833CFC32A34F57B40**

Amount of Each Disbursement this Period

480.75
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kelby Daigle**

Mailing Address 1106 Martha Hebert Rd

City

Breaux Bridge

State

LA

Zip Code

70517-7711

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		16		2016

**Transaction ID : B67C0D01B3B694452B31**

Amount of Each Disbursement this Period

500.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1230.75
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. John Griffin**

Mailing Address 1511 La Don Drive

City	State	Zip Code
Bossier City	LA	71111-5313

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		16		2016

**Transaction ID : B88E32A168A8B4048852**

Amount of Each Disbursement this Period

1250.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. David Neef**

Mailing Address 208 Charles Dr

City	State	Zip Code
Lafayette	LA	70508-4506

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		16		2016

**Transaction ID : BA25D9D6CFFE9493788C**

Amount of Each Disbursement this Period

1250.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Stephanie Hammer**

Mailing Address 1247 Old Bloomington Rd

City	State	Zip Code
Ames	IA	50010-9466

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2016

**Transaction ID : BE183537C257846BA87F**

Amount of Each Disbursement this Period

210.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2710.00
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<b>X</b>	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 74 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. ASE Group, Inc.**

Mailing Address 6600 College Blvd #310

City  
Overland ParkState  
KSZip Code  
66211-1522Purpose of Disbursement  
PAC Event Management

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

**Transaction ID : B825540C5C4784D4080A**

Amount of Each Disbursement this Period

5000.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Campaign Data Solutions, LLC**

Mailing Address 7740 Tinted Mesa Ct

City  
Las VegasState  
NVZip Code  
89149-6438Purpose of Disbursement  
Strategy Consulting, Room Rental, Shipping

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

**Transaction ID : BF62320EC7942441F972**

Amount of Each Disbursement this Period

10751.43
----------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Alabama GOP**

Mailing Address 3505 Lorna Rd

City  
BirminghamState  
ALZip Code  
35216-5901Purpose of Disbursement  
Voter Lists

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

**Transaction ID : BADAAD9A38CC54F9BB5**

Amount of Each Disbursement this Period

5000.00
---------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

20751.43
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Rigel Strategies LLC**Mailing Address 3948 Legacy Drive  
Ste 106-282

City Plano State TX Zip Code 75023-8300

Purpose of Disbursement  
PAC Radio Advertising

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2016

Transaction ID : B3C8B9DFC0ACB47CFB7E

Amount of Each Disbursement this Period

41170.00
----------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. In-House Production**

Mailing Address 6620 W Arby Avenue

City Las Vegas State NV Zip Code 89118-4663

Purpose of Disbursement  
PAC Video Production

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2016

Transaction ID : BAA44FFDD650340CDBC3

Amount of Each Disbursement this Period

1614.74
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bill Stewart**

Mailing Address 1214 South 10th Street (Rear)

City Gadsden State AL Zip Code 35901-5022

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2016

Transaction ID : BCD7FAA7FCCF54E7386C

Amount of Each Disbursement this Period

391.95
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☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

43176.69
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Advantage Direct**

Mailing Address 2300 Clarendon Blvd Ste 303

City	State	Zip Code
Arlington	VA	22201-3367

Purpose of Disbursement  
PAC Voter ID Program-Subsequently Voided

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2016

**Transaction ID : B2BF57D6BAF804012BF0**

Amount of Each Disbursement this Period

3929.05
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Saratoga Strategies**

Mailing Address 1550 Old Annetta

City	State	Zip Code
Aledo	TX	76008-3855

Purpose of Disbursement  
PAC Fundraising Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2016

**Transaction ID : B3532C47A0E084E8A845**

Amount of Each Disbursement this Period

9000.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Campaign Sidekick**

Mailing Address 1550 Old Annetta

City	State	Zip Code
Aledo	TX	76008-3855

Purpose of Disbursement  
PAC Robo Calls

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2016

**Transaction ID : B9E01E6F811664DFA835**

Amount of Each Disbursement this Period

4523.24
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

17452.29
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 77 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. September Strategies**

Mailing Address 1712 Pioneer

City	State	Zip Code
Cheyenne	WY	82001-4406

Purpose of Disbursement  
PAC Voter ID

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2016

**Transaction ID : B5F7066EDFF854DD89AA**

Amount of Each Disbursement this Period

30000.00
----------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Thomas Graphics, Inc.**

Mailing Address PO Box 142226

City	State	Zip Code
Austin	TX	78714-2226

Purpose of Disbursement  
PAC Printing

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2016

**Transaction ID : BA49C21C93ADC4AEEB55**

Amount of Each Disbursement this Period

7906.33
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Aristotle International, Inc**

Mailing Address 205 Pennsylvania Ave SE

City	State	Zip Code
Washington	DC	20003-1164

Purpose of Disbursement  
PAC Software

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2016

**Transaction ID : BA1DA1F668D364AD38B7**

Amount of Each Disbursement this Period

2250.00
---------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

40156.33

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Cross Strategies**

Mailing Address 13819 Oak Bend Dr

City Baker	State LA	Zip Code 70714-4201
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Purpose of Disbursement  
Strategy Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2016

**Transaction ID : BF66834C8E3A0457C8ED**

Amount of Each Disbursement this Period

8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Drew Ryun**

Mailing Address 1550 Old Annetta

City Aledo	State TX	Zip Code 76008-3855
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Purpose of Disbursement  
Reimbursement for Travel Expenses

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2016

**Transaction ID : BEAC7773F3A474915A32**

Amount of Each Disbursement this Period

1093.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Melinda Wadsley**

Mailing Address 1247 Old Bloomington Rd

City Ames	State IA	Zip Code 50010-9466
--------------	-------------	------------------------

Purpose of Disbursement  
See Below-No Itemization Necessary

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2016

**Transaction ID : B2F55FFA11DD2407CA70**

Amount of Each Disbursement this Period

494.56

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9587.89

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 79 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Kristoffer Shafer**

Mailing Address 3628 Kelvin Ave

City	State	Zip Code
Fort Worth	TX	76133-4211

Purpose of Disbursement  
Grassroots Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2016

**Transaction ID : B2A02BB2447DA49A7A3D**

Amount of Each Disbursement this Period

5102.47
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Justin Rimmer**

Mailing Address 508 Beverly Dr

City	State	Zip Code
Colleyville	TX	76034-3137

Purpose of Disbursement  
PAC Event Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2016

**Transaction ID : B2BFAF6475A55447F9AE**

Amount of Each Disbursement this Period

2275.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. William Errickson**

Mailing Address 331 Nisbet St #50 Apt 912-C

City	State	Zip Code
Jacksonville	AL	36265-1057

Purpose of Disbursement  
Strategy Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2016

**Transaction ID : BE0684C41195C4B1FA39**

Amount of Each Disbursement this Period

174.34
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7551.81
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 80 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Sharon DuPriest**

Mailing Address 1633 Winston St

City Florence	State AL	Zip Code 35630-2715
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Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2016

**Transaction ID : BA767AEABC9B54207BCC**

Amount of Each Disbursement this Period

309.06
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bill Stewart**

Mailing Address 1214 South 10th Street (Rear)

City Gadsden	State AL	Zip Code 35901-5022
-----------------	-------------	------------------------

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2016

**Transaction ID : B999ABA66C32340EE937**

Amount of Each Disbursement this Period

396.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kimberly Glass**

Mailing Address 116 County Road 737

City Scottsboro	State AL	Zip Code 35768-6616
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Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2016

**Transaction ID : B9095129C204A4A44A8A**

Amount of Each Disbursement this Period

232.74
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

937.80
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 81 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Bradley Netherton**

Mailing Address 1633 Winston St

City Florence	State AL	Zip Code 35630-2715
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Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2016

**Transaction ID : BF3BFB34691A24CCCB91**

Amount of Each Disbursement this Period

180.65
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bucky Carlton**

Mailing Address 2048 Cahaba Creest Dr

City Birmingham	State AL	Zip Code 35242-4417
--------------------	-------------	------------------------

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2016

**Transaction ID : BCA79B3CCA41449ABBB**

Amount of Each Disbursement this Period

998.46
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bradley Burget**

Mailing Address 4415 Chisholm Rd Apt D4

City Florence	State AL	Zip Code 35630-7333
------------------	-------------	------------------------

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2016

**Transaction ID : B166638179D85456783C**

Amount of Each Disbursement this Period

65.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1244.11
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Joe Errickson**

Mailing Address 1633 Winston St

City Florence	State AL	Zip Code 35630-2715
------------------	-------------	------------------------

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2016

**Transaction ID : BF58CB65154C34A3A83D**

Amount of Each Disbursement this Period

342.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Christopher Drensek**

Mailing Address 103 Moonshadow Cir

City Huntsville	State AL	Zip Code 35811-8690
--------------------	-------------	------------------------

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2016

**Transaction ID : BEB4729D770634D38AFB**

Amount of Each Disbursement this Period

112.86
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Christine Wozny**

Mailing Address 1633 Winston St

City Florence	State AL	Zip Code 35630-2715
------------------	-------------	------------------------

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2016

**Transaction ID : BAF7778B17A9E4D44A0C**

Amount of Each Disbursement this Period

113.04
--------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

567.90

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 83 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Jason Mabe**

Mailing Address 4415 Chisholm Rd Apt D4

City Florence	State AL	Zip Code 35630-7333
------------------	-------------	------------------------

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2016

**Transaction ID : B8FDBF3B44F274ABC9A**

Amount of Each Disbursement this Period

71.84
-------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Robert Edwards**

Mailing Address 1633 Winston St

City Florence	State AL	Zip Code 35630-2715
------------------	-------------	------------------------

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2016

**Transaction ID : B63B264C6D71B4588A44**

Amount of Each Disbursement this Period

433.90
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Nathaniel White**

Mailing Address 1633 Winston Ave

City Florence	State AL	Zip Code 35630-2715
------------------	-------------	------------------------

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2016

**Transaction ID : B5D652251CC294368A4D**

Amount of Each Disbursement this Period

1250.00
---------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1755.74
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 84 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address 5555 Hilton Ave Ste 106

City	State	Zip Code
Baton Rouge	LA	70808-2597

Purpose of Disbursement  
Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2016

**Transaction ID : B4BC2A41CC9F84F7385D**

Amount of Each Disbursement this Period

94.78
-------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address 5555 Hilton Ave Ste 106

City	State	Zip Code
Baton Rouge	LA	70808-2597

Purpose of Disbursement  
Transaction Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2016

**Transaction ID : B9DF5CB49EBFD4D2A9DC**

Amount of Each Disbursement this Period

8684.24
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ASE Group, Inc.**

Mailing Address 6600 College Blvd #310

City	State	Zip Code
Overland Park	KS	66211-1522

Purpose of Disbursement  
PAC Event Management

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	29	/	2016

**Transaction ID : BD569F20A80FE4977B55**

Amount of Each Disbursement this Period

80044.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

88823.02
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 85 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. John Griffin**

Mailing Address 1511 La Don Drive

City	State	Zip Code
Bossier City	LA	71111-5313

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		29		2016

**Transaction ID : B853846F57B0B4FCE8D7**

Amount of Each Disbursement this Period

2326.86
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Dakota West**

Mailing Address 2911 Centenary Blvd #424

City	State	Zip Code
Shreveport	LA	71104-3335

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		29		2016

**Transaction ID : B9EB520E75F9941F9973**

Amount of Each Disbursement this Period

250.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. David Neef**

Mailing Address 208 Charles Dr

City	State	Zip Code
Lafayette	LA	70508-4506

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		29		2016

**Transaction ID : B7ABFF62D8D4048FCB63**

Amount of Each Disbursement this Period

1714.98
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4291.84
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Shellie Kirby**

Mailing Address 12562 N Lake Shore D

City  
WalkerState  
LAZip Code  
70785-8210Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

**Transaction ID : B6F5710B9AD254589AD5**

Amount of Each Disbursement this Period

250.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Joshua Gilmore**

Mailing Address 29471 Joyce St

City  
WalkerState  
LAZip Code  
70785-8022Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

**Transaction ID : B52237ECC15964B8B89D**

Amount of Each Disbursement this Period

500.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kelby Daigle**

Mailing Address 1106 Martha Hebert Rd

City  
Breaux BridgeState  
LAZip Code  
70517-7711Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

**Transaction ID : B785CF0E0299D45BDB26**

Amount of Each Disbursement this Period

500.00
--------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1250.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 87 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. John Hobgood**

Mailing Address 349 Albany Ave

City

Shreveport

State

LA

Zip Code

71105-2001

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 29 / 2016**Transaction ID : B15322E54B0B14A14A78**

Amount of Each Disbursement this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Christopher Davis**

Mailing Address 12562 N Lake Shre Dr

City

Walker

State

LA

Zip Code

70785-8210

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 29 / 2016**Transaction ID : B8327A96AC6E64BC49C6**

Amount of Each Disbursement this Period

531.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Dylan Simon**

Mailing Address 208 Charles Dr

City

Lafayette

State

LA

Zip Code

70508-4506

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 29 / 2016**Transaction ID : B5703110A39CC4CBC9B5**

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

906.25

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 88 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Jake Morrison**

Mailing Address 2911 Centenary Blvd #622

City

Shreveport

State

LA

Zip Code

71104-3335

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	29	/	2016

**Transaction ID : B3D991853CAE8412F866**

Amount of Each Disbursement this Period

250.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Elizabeth Hodges**

Mailing Address 204 Paissais St

City

Folsom

State

LA

Zip Code

70437-5534

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	29	/	2016

**Transaction ID : B4985624CE8CA4BA4A44**

Amount of Each Disbursement this Period

500.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Maggie Babcock**

Mailing Address 13600 Quail Run Ave

City

Denham Springs

State

LA

Zip Code

70726-5955

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	29	/	2016

**Transaction ID : B423714BED4EC492E933**

Amount of Each Disbursement this Period

468.75
--------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1218.75
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 89 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. William Errickson**

Mailing Address 331 Nisbet St #50 Apt 912-C

City	State	Zip Code
Jacksonville	AL	36265-1057

Purpose of Disbursement  
Travel Reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

**Transaction ID : BC2C5E28011DC4720B67**

Amount of Each Disbursement this Period

180.23
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Ashton Kirkpatrick**

Mailing Address 1223 Sharlo Ave

City	State	Zip Code
Baton Rouge	LA	70820-4547

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

**Transaction ID : B883625D9D34340AB87E**

Amount of Each Disbursement this Period

406.25
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Stephanie Matt**

Mailing Address 14232 Cottingham Ct

City	State	Zip Code
Baton Rouge	LA	70817-3537

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

**Transaction ID : BA8B2966499DF4AB2B65**

Amount of Each Disbursement this Period

250.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

836.48
--------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 90 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Sabrina Warren**

Mailing Address 1511 La Don Drive

City	State	Zip Code
Bossier City	LA	71111-5313

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		29		2016

**Transaction ID : BD6FD157DB3FA410ABB5**

Amount of Each Disbursement this Period

250.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Rachel Howard**

Mailing Address 2700 Ambassador Caffery Apt 55

City	State	Zip Code
Lafayette	LA	70506-5932

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		29		2016

**Transaction ID : BCD23B6F6A29046D7926**

Amount of Each Disbursement this Period

250.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Dillon Rogers**

Mailing Address 1511 La Don Dr

City	State	Zip Code
Bossier City	LA	71111-5313

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		29		2016

**Transaction ID : BFDA069AD315E4C10B66**

Amount of Each Disbursement this Period

250.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

750.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 91 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Greg Vanni**

Mailing Address 1511 La Don Dr

City	State	Zip Code
Bossier City	LA	71111-5313

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		29		2016

**Transaction ID : B9A8F89D52FFD434CB77**

Amount of Each Disbursement this Period

187.50
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Paola Vargas**

Mailing Address 235 N Military Rd

City	State	Zip Code
Slidell	LA	70461-2063

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		29		2016

**Transaction ID : BC30B1FE57ED84B95B13**

Amount of Each Disbursement this Period

500.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jonathan Davis**

Mailing Address 12562 N Lake Shore Dr

City	State	Zip Code
Walker	LA	70785-8210

Purpose of Disbursement  
Field Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		29		2016

**Transaction ID : BB702036A9A9049F3AE6**

Amount of Each Disbursement this Period

1411.48
---------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2098.98
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Greg Willis**

Mailing Address 9908 Stratmore Circle

City

Shreveport

State

LA

Zip Code

71115-3120

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

**Transaction ID : B617AF836881B4C7EAEF**

Amount of Each Disbursement this Period

667.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Lauren Neil**

Mailing Address 208 Charles D

City

Lafayette

State

LA

Zip Code

70508-4506

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

**Transaction ID : B667F3D4CBBE545CAA54**

Amount of Each Disbursement this Period

300.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kate Albin**

Mailing Address 317 Gentilly Circle

City

Shreveport

State

LA

Zip Code

71106-6217

Purpose of Disbursement

Field Consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

**Transaction ID : BC3E6BB505BCE4ED7BA**

Amount of Each Disbursement this Period

187.50
--------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1154.50
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 93 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 650448

City	State	Zip Code
Dallas	TX	75265-0448

Purpose of Disbursement  
See Below

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	17	/	2016

**Transaction ID : B2F1E727E8EBF4115994**

Amount of Each Disbursement this Period

96750.08
----------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City	State	Zip Code
Fort Worth	TX	76155-2605

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	17	/	2016

**Transaction ID : BA6C94D74E3134842A60**

Amount of Each Disbursement this Period

3726.57
---------

☒ Memo Item  
PAC Travel Expense

Full Name (Last, First, Middle Initial)

**C. Campaign Sidekick**

Mailing Address 1550 Old Annetta

City	State	Zip Code
Aledo	TX	76008-3855

Purpose of Disbursement  
PAC Calls

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	17	/	2016

**Transaction ID : B8F8449FECED7417DA15**

Amount of Each Disbursement this Period

3150.00
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☒ Memo Item  
PAC Calls**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

96750.08
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 94 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Kopy Rite**

Mailing Address 2175 Crooks Rd #101

City	State	Zip Code
Rochester Hills	MI	48309-3617

Purpose of Disbursement  
PAC Electronics/DVDs

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2016

**Transaction ID : BD2939BBD76C64D67862**

Amount of Each Disbursement this Period

6323.60
---------

☒ Memo Item  
PAC Electronics/DVDs

Full Name (Last, First, Middle Initial)

**B. Terrace View Event Center**

Mailing Address 230 St Andrews Way

City	State	Zip Code
Sioux Center	IA	51250-2957

Purpose of Disbursement  
PAC Event Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2016

**Transaction ID : BD87BB2B97C244A87857**

Amount of Each Disbursement this Period

788.62
--------

☒ Memo Item  
PAC Event Expense

Full Name (Last, First, Middle Initial)

**C. Contemporary Services**

Mailing Address 17101 Superior St

City	State	Zip Code
Northridge	CA	91325-1961

Purpose of Disbursement  
PAC Event Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2016

**Transaction ID : B3417A02A671543B79E7**

Amount of Each Disbursement this Period

576.64
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☒ Memo Item  
PAC Event Expense
**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 95 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Ramada Inn & Convention Center**

Mailing Address 205 W 4th St

City Waterloo	State IA	Zip Code 50701-5403
------------------	-------------	------------------------

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
02 / 17 / 2016

**Transaction ID : BF19C72D5EDE34CD2888**

Amount of Each Disbursement this Period

2116.74
---------

☒ Memo Item  
PAC Travel Expense

Full Name (Last, First, Middle Initial)

**B. Sound Concepts**

Mailing Address 1001 3rd Ave SW

City Cedar Rapids	State IA	Zip Code 52404-1813
----------------------	-------------	------------------------

Purpose of Disbursement  
PAC Event Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
02 / 17 / 2016

**Transaction ID : BB096906DA0714435B6C**

Amount of Each Disbursement this Period

7800.73
---------

☒ Memo Item  
PAC Event Expense

Full Name (Last, First, Middle Initial)

**C. Resurgent Media**

Mailing Address 736 Waverly Pt

City Macon	State GA	Zip Code 31210-7548
---------------	-------------	------------------------

Purpose of Disbursement  
PAC Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
02 / 17 / 2016

**Transaction ID : B080E99DD237C4DC8A2D**

Amount of Each Disbursement this Period

5000.00
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☒ Memo Item  
PAC Advertising
**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 96 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. KES Productions**

Mailing Address 2105 Clark St

City	State	Zip Code
Sioux City	IA	51104-3239

Purpose of Disbursement  
PAC Video Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2016

**Transaction ID : B09D18A8390FB4266991**

Amount of Each Disbursement this Period

1647.80
---------

☒ Memo Item  
PAC Video Production

Full Name (Last, First, Middle Initial)

**B. FedEx**

Mailing Address 942 S Shady Grove Rd

City	State	Zip Code
Memphis	TN	38120-4117

Purpose of Disbursement  
PAC Shipping

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2016

**Transaction ID : BF8BB855591F44390821**

Amount of Each Disbursement this Period

1135.45
---------

☒ Memo Item  
PAC Shipping

Full Name (Last, First, Middle Initial)

**C. La Quinta**

Mailing Address 13450 Vera McGowan

City	State	Zip Code
Walker	LA	70785-8508

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2016

**Transaction ID : B2B2720BC652E48F6807**

Amount of Each Disbursement this Period

339.00
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☒ Memo Item  
PAC Travel Expense
**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 97 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Fairfield Inn**

Mailing Address 6880 Fleur Dr

City	State	Zip Code
Des Moines	IA	50321-3127

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2016

**Transaction ID : B452DD08136A94A7BB21**

Amount of Each Disbursement this Period

625.70
--------

☒ Memo Item  
PAC Travel Expense

Full Name (Last, First, Middle Initial)

**B. Hotels.com**

Mailing Address 10440 N Central Expwy Ste 400

City	State	Zip Code
Dallas	TX	75231-2228

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2016

**Transaction ID : B7C74DF63D9754CF4A56**

Amount of Each Disbursement this Period

3023.84
---------

☒ Memo Item  
PAC Travel Expense

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 233 South Wacker Drive

City	State	Zip Code
Chicago	IL	60606-7147

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2016

**Transaction ID : BF9EB18778862450D995**

Amount of Each Disbursement this Period

1047.20
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☒ Memo Item  
PAC Travel Expense
**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 98 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Empire International**

Mailing Address 225 Meadowlands Pkwy #1

City	State	Zip Code
Secaucus	NJ	07094-2316

Purpose of Disbursement  
PAC Event Transportation

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2016

**Transaction ID : BCCB80525FEEB4F1487D**

Amount of Each Disbursement this Period

28544.83
----------

☒ Memo Item  
PAC Event Transportation

Full Name (Last, First, Middle Initial)

**B. Holiday Inn Express**

Mailing Address 4723 Southern Hills Dr

City	State	Zip Code
Sioux City	IA	51106-4734

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2016

**Transaction ID : BE1C252EF3C1E44A7AB3**

Amount of Each Disbursement this Period

473.87
--------

☒ Memo Item  
PAC Travel Expense

Full Name (Last, First, Middle Initial)

**C. Hertz Car Rental**

Mailing Address 14501 Hertz Quail Springs Pkwy

City	State	Zip Code
Oklahoma City	OK	73134-2628

Purpose of Disbursement  
PAC Travel Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2016

**Transaction ID : BCFA645CE28A24F17867**

Amount of Each Disbursement this Period

1227.58
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☒ Memo Item  
PAC Travel Expense
**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 99 OF 132

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Keep the Promise PAC**

Full Name (Last, First, Middle Initial)

**A. Louisiana Secretary of State**

Mailing Address 8585 Archives Ave

City  
Baton RougeState  
LAZip Code  
70809-2421Purpose of Disbursement  
PAC Data

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
02		17		2016

**Transaction ID : B4D88355E96874D2B84D**

Amount of Each Disbursement this Period

5005.00
---------

☒ Memo Item  
PAC Data
**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

☐ Memo Item
**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

☐ Memo Item
**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00
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770884.85
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	21b		22		23		24		25		26
	27	<b>x</b>	28a		28b		28c		29		30b

Age Group	Percentage
18-24	10.00
25-34	15.00
35-44	20.00
45-54	25.00
55-64	30.00
65-74	35.00
75+	40.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 101 OF 132

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Aledo Grafix, Inc.**Nature of Debt (Purpose):  
Graphic Design

Mailing Address PO Box 1024

City State  
AledoZip Code  
TX 76008-1024

Outstanding Balance Beginning This Period

455.63

Transaction ID : D34B8E8CF868E4D5CBCB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

455.63

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Thomas Graphics, Inc.**Nature of Debt (Purpose):  
Printing

Mailing Address PO Box 142226

City State  
AustinZip Code  
TX 78714-2226

Outstanding Balance Beginning This Period

59675.89

Transaction ID : DBFA0009D95E849D5BF7

Amount Incurred This Period

0.00

Payment This Period

59675.89

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Facebook**Nature of Debt (Purpose):  
Digital Media Production/Placement

Mailing Address 601 Willow Rd Bldg 10

City State Zip Code  
Menlo Park CA 94025-2618

Outstanding Balance Beginning This Period

9407.00

Transaction ID : D44CF679708394690A2A

Amount Incurred This Period

0.00

Payment This Period

8737.85

Outstanding Balance at Close of This Period

669.15

1) **SUBTOTALS** This Period This Page (optional)..... ►

1124.78

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 102 OF 132

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Broken Arrow Wear**Nature of Debt (Purpose):  
PAC Tshirt Printing

Mailing Address 4133 Merle Hay Rd

City State

Zip Code

Des Moines

IA

50310-1316

Outstanding Balance Beginning This Period

22017.84

Transaction ID : DE9BDA45D6FAB45EBBEF

Amount Incurred This Period

0.00

Payment This Period

22017.84

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Left Hand Design**Nature of Debt (Purpose):  
PAC Graphic Design

Mailing Address 7233 Manchaca Rd #37

City State

Zip Code

Austin

TX

78745-5293

Outstanding Balance Beginning This Period

4152.75

Transaction ID : DF02C4D0DA14A4D20AD0

Amount Incurred This Period

0.00

Payment This Period

4152.75

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign Sidekick**Nature of Debt (Purpose):  
PAC Robo Calls

Mailing Address 1550 Old Annetta

City

State

Zip Code

Aledo

TX

76008-3855

Outstanding Balance Beginning This Period

825.40

Transaction ID : DD1DDE82C484F4CA7983

Amount Incurred This Period

0.00

Payment This Period

825.40

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 103 OF 132

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign Sidekick**Nature of Debt (Purpose):  
PAC Robo Calls

Mailing Address 1550 Old Annetta

City State  
AledoZip Code  
TX 76008-3855

Outstanding Balance Beginning This Period

0.00

Transaction ID : D88A84560A30549FA97F

Amount Incurred This Period

3096.73

Payment This Period

0.00

Outstanding Balance at Close of This Period

3096.73

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign Sidekick**Nature of Debt (Purpose):  
PAC Robo Calls

Mailing Address 1550 Old Annetta

City State  
AledoZip Code  
TX 76008-3855

Outstanding Balance Beginning This Period

0.00

Transaction ID : D5B5F615A37274BB4A25

Amount Incurred This Period

793.42

Payment This Period

0.00

Outstanding Balance at Close of This Period

793.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**AGE Graphics**Nature of Debt (Purpose):  
PAC Signs

Mailing Address 678 Township Rd 297

City State Zip Code  
Little Hocking CO 45742

Outstanding Balance Beginning This Period

0.00

Transaction ID : D3ABC2EA509494EB0B46

Amount Incurred This Period

6590.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6590.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

10480.15

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 104 OF 132

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign Data Solutions, LLC**Nature of Debt (Purpose):  
PAC Data

Mailing Address 7740 Tinted Mesa Ct

City State

Zip Code

Las Vegas

NV

89149-6438

Outstanding Balance Beginning This Period

0.00

Transaction ID : DADA928DD7F804B699A4

Amount Incurred This Period

6157.73

Payment This Period

0.00

Outstanding Balance at Close of This Period

6157.73

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign Data Solutions, LLC**Nature of Debt (Purpose):  
PAC Printing

Mailing Address 7740 Tinted Mesa Ct

City State

Zip Code

Las Vegas

NV

89149-6438

Outstanding Balance Beginning This Period

0.00

Transaction ID : D24501BB378D747FD802

Amount Incurred This Period

990.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

990.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign Data Solutions, LLC**Nature of Debt (Purpose):  
PAC Data

Mailing Address 7740 Tinted Mesa Ct

City

State

Zip Code

Las Vegas

NV

89149-6438

Outstanding Balance Beginning This Period

0.00

Transaction ID : D1611734E91094FB1AA0

Amount Incurred This Period

2595.60

Payment This Period

0.00

Outstanding Balance at Close of This Period

2595.60

1) **SUBTOTALS** This Period This Page (optional)..... ►

9744.13

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 105 OF 132

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**RiverCity Print & Imaging, Inc.**Nature of Debt (Purpose):  
PAC Printing

Mailing Address 11511 Huron Lane

City State

Zip Code

Little Rock

AR

72211-1846

Outstanding Balance Beginning This Period

0.00

Transaction ID : DF9EDC77B77324F9D857

Amount Incurred This Period

560.61

Payment This Period

0.00

Outstanding Balance at Close of This Period

560.61

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Target Marketing**Nature of Debt (Purpose):  
PAC Printing

Mailing Address 520 Main Street

City State

Zip Code

Broken Arrow

OK

74012

Outstanding Balance Beginning This Period

0.00

Transaction ID : DFE7C47E67EA54A51BA2

Amount Incurred This Period

558.84

Payment This Period

0.00

Outstanding Balance at Close of This Period

558.84

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Facebook**Nature of Debt (Purpose):  
Digital Media Production/Placement

Mailing Address 601 Willow Rd Bldg 10

City

State

Zip Code

Menlo Park

CA

94025-2618

Outstanding Balance Beginning This Period

0.00

Transaction ID : DCB89A05435A34D26A48

Amount Incurred This Period

24050.68

Payment This Period

0.00

Outstanding Balance at Close of This Period

24050.68

1) **SUBTOTALS** This Period This Page (optional)..... ►

25170.13

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 106 OF 132

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**Keep the Promise PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign Sidekick**Nature of Debt (Purpose):  
PAC Robo Calls

Mailing Address 1550 Old Annetta

City State  
AledoZip Code  
TX 76008-3855

Outstanding Balance Beginning This Period

0.00

Transaction ID : DB5AA988E96154EDA956

Amount Incurred This Period

2514.53

Payment This Period

0.00

Outstanding Balance at Close of This Period

2514.53

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign Sidekick**Nature of Debt (Purpose):  
PAC Robo Calls

Mailing Address 1550 Old Annetta

City State  
AledoZip Code  
TX 76008-3855

Outstanding Balance Beginning This Period

0.00

Transaction ID : DE3F9E64B294C4F1D8A0

Amount Incurred This Period

3173.66

Payment This Period

0.00

Outstanding Balance at Close of This Period

3173.66

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**SirSpeedy**Nature of Debt (Purpose):  
PAC Printing

Mailing Address 733 Marquette Avenue

City State Zip Code  
Minneapolis MN 55402-2309

Outstanding Balance Beginning This Period

0.00

Transaction ID : D0C1025380F43488CBF8

Amount Incurred This Period

937.64

Payment This Period

0.00

Outstanding Balance at Close of This Period

937.64

1) **SUBTOTALS** This Period This Page (optional)..... ►

6625.83

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 107 OF 132

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Keep the Promise PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Thomas Graphics, Inc.

Nature of Debt (Purpose):  
PAC Printing

Mailing Address PO Box 142226

City State

Zip Code

Austin

TX

78714-2226

Outstanding Balance Beginning This Period

0.00

Transaction ID : DFB037A2242514B6B83E

Amount Incurred This Period

11817.04

Payment This Period

0.00

Outstanding Balance at Close of This Period

11817.04

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

11817.04

2) **TOTALS** This Period (last page this line number only)..... ►

64962.06

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

64962.06

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 108 OF 132  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span>			
Full Name of Payee <b>Campaign Sidekick</b>		<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">08</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
Mailing Address 1550 Old Annetta		Amount <span style="border:1px solid black; padding:2px;">295.00</span>	
City Aledo	State TX	Zip Code 76008-3855	Transaction ID : <b>E58BD383F023249FEA67</b>
Purpose of Expenditure PAC Robo Calls		Category/ Type <span style="border:1px solid black; padding:2px;"></span>	Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span>
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">61022.67</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <b>Thomas Graphics, Inc.</b>		<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">08</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
Mailing Address PO Box 142226		Amount <span style="border:1px solid black; padding:2px;">25379.24</span>	
City Austin	State TX	Zip Code 78714-2226	Transaction ID : <b>E05C3BEE3253B41FB864</b>
Purpose of Expenditure See 12-31 and Jan IEs		Category/ Type <span style="border:1px solid black; padding:2px;"></span>	Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span>
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">61022.67</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		<span style="border:1px solid black; padding:2px;">25674.24</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶		<span style="border:1px solid black; padding:2px;"></span>	
(c) TOTAL Independent Expenditures..... ▶		<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Dathan Voelter</i>		Date <span style="border:1px solid black; padding:2px;">MM</span> / <span style="border:1px solid black; padding:2px;">DD</span> / <span style="border:1px solid black; padding:2px;">YYYYYY</span> <span style="border:1px solid black; padding:2px;">09</span> / <span style="border:1px solid black; padding:2px;">29</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
		[Electronically Filed]	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 109 OF 132  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00575415         </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;">           M M M / D D D / Y Y Y Y Y Y         </div>	

Full Name of Payee <b>Left Hand Design</b>		<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">02</div> <div style="border: 1px solid black; padding: 2px;">08</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address 7233 Manchaca Rd #37		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4152.75</div>	
City Austin	State TX	Zip Code 78745-5293	<b>Transaction ID : E6E35A799F96B4057AC0</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> </div>
Purpose of Expenditure PAC Graphic Design		Category/Type <div style="border: 1px solid black; padding: 2px;"></div>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">61022.67</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Thomas Graphics, Inc.</b>		<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">02</div> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">2016</div> </div>	
Mailing Address PO Box 142226		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">28001.03</div>	
City Austin	State TX	Zip Code 78714-2226	<b>Transaction ID : EC943F4A7EFCD47B0936</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> </div>
Purpose of Expenditure See 12-31 and Jan IEs		Category/Type <div style="border: 1px solid black; padding: 2px;"></div>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">92051.85</div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">32153.78</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Dathan Voelter

[Electronically Filed]

Date

09

29

2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 110 OF 132  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Thomas Graphics, Inc.</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 09 / 2016</b>	
Mailing Address <b>PO Box 142226</b>				Amount <b>3028.15</b>	
City <b>Austin</b>	State <b>TX</b>	Zip Code <b>78714-2226</b>	Transaction ID : <b>E844ACDFCBCF14296BB1</b>		
Purpose of Expenditure See 12-31 and Jan IEs		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate <b>Rafael Edward "Ted" Cruz</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		<b>92051.85</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Thomas Graphics, Inc.</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 10 / 2016</b>	
Mailing Address <b>PO Box 142226</b>				Amount <b>3323.50</b>	
City <b>Austin</b>	State <b>TX</b>	Zip Code <b>78714-2226</b>	Transaction ID : <b>EC41CC7405A6F40599A3</b>		
Purpose of Expenditure <b>PAC Video Production</b>		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 09 / 2016</b>		
Name of Federal Candidate <b>Rafael Edward "Ted" Cruz</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>SC</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>206798.68</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>6351.65</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Dathan Voelter

[Electronically Filed]

Date

MM / DD / YYYY  
**09 / 29 / 2016**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 111 OF 132  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00575415</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>			
Full Name of Payee <b>Advantage Direct</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> <b>02 / 11 / 2016</b>	
Mailing Address 2300 Clarendon Blvd Ste 303		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> <b>3929.05</b>	
City Arlington	State VA	Zip Code 22201-3367	<b>Transaction ID : E771405D439BF445296B</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> <b>02 / 10 / 2016</b>
Purpose of Expenditure PAC Voter ID Program		Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    District: <u>00</u> State: <u>SC</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> <b>221590.02</b>			
Full Name of Payee <b>Rigel Strategies LLC</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> <b>02 / 11 / 2016</b>	
Mailing Address 3948 Legacy Drive Ste 106-282		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> <b>8911.20</b>	
City Plano	State TX	Zip Code 75023-8300	<b>Transaction ID : E27506A0BADD640F58A1</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> <b>02 / 11 / 2016</b>
Purpose of Expenditure PAC Radio Advertising		Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    District: <u>00</u> State: <u>SC</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> <b>221590.02</b>			
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> <b>12840.25</b>	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Dathan Voelter</i>		Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> <b>09 / 29 / 2016</b>	
[Electronically Filed]			

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 112 OF 132  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> </div>	

Full Name of Payee <b>Campaign Sidekick</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 11 / 2016</b>	
Mailing Address 1550 Old Annetta				Amount 1951.09	
City Aledo	State TX	Zip Code 76008-3855		Transaction ID : <b>ED2F1FFE9280341B88C7</b>	
Purpose of Expenditure PAC Robo Calls		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 10 / 2016</b>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>SC</u>	
Calendar Year-To-Date Per Election for Office Sought		221590.02		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Thomas Graphics, Inc.</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 16 / 2016</b>	
Mailing Address PO Box 142226				Amount 3005.21	
City Austin	State TX	Zip Code 78714-2226		Transaction ID : <b>EE1E53E0BCA344616A92</b>	
Purpose of Expenditure PAC Video Production		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 16 / 2016</b>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>SC</u>	
Calendar Year-To-Date Per Election for Office Sought		224595.23		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	4956.30
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Dathan Voelter

[Electronically Filed]

Date

 MM / DD / YYYY  
**09 / 29 / 2016**

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 113 OF 132  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name of Payee <b>Campaign Sidekick</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">17</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>		
Mailing Address 1550 Old Annetta			Amount <span style="border: 1px solid black; padding: 2px;">825.40</span>		
City Aledo		State TX	Zip Code 76008-3855		Transaction ID : E20CEE0C77624470FA9A
Purpose of Expenditure PAC Robo Calls via Amex		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State:		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>American Express</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">17</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>		
Mailing Address PO Box 650448			Amount <span style="border: 1px solid black; padding: 2px;">9959.76</span>		
City Dallas		State TX	Zip Code 75265-0448		Transaction ID : EE5ADC8A4B07247CFAD
Purpose of Expenditure See Below-See Broken Arrow IE 2-17-16		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State:		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;">10785.16</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Dathan Voelter			Date <span style="border: 1px solid black; padding: 2px;">09</span> / <span style="border: 1px solid black; padding: 2px;">29</span> / <span style="border: 1px solid black; padding: 2px;">2016</span> [Electronically Filed]		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 114 OF 132  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00575415</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>					
Full Name of Payee <b>Broken Arrow Wear</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>		
Mailing Address 4133 Merle Hay Rd			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
City Des Moines		State IA	Zip Code 50310-1316		Transaction ID : <b>E5EAB43E1D6EE40A6AAE</b>
Purpose of Expenditure PAC Printing Via Amex		Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>	
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Facebook</b>			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>		
Mailing Address 601 Willow Rd Bldg 10			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
City Menlo Park		State CA	Zip Code 94025-2618		Transaction ID : <b>E19B6B1C88854441580F</b>
Purpose of Expenditure PAC GOTV Effort - Via Amex		Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>	
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 30755.69		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Dathan Voelter			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> 09 / 29 / 2016		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 115 OF 132  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span>					
Full Name of Payee <b>Campaign Data Solutions, LLC</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span> <b>02 / 18 / 2016</b>		
Mailing Address 7740 Tinted Mesa Ct			Amount <span style="border: 1px solid black; padding: 2px;">7241.30</span>		
City Las Vegas		State NV	Zip Code 89149-6438		
Purpose of Expenditure PAC Data - See 2-16 IEs		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Transaction ID : <b>E5F628FAFCC0A4B928B7</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span>	
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">140834.00</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Thomas Graphics, Inc.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span> <b>02 / 19 / 2016</b>		
Mailing Address PO Box 142226			Amount <span style="border: 1px solid black; padding: 2px;">3267.47</span>		
City Austin		State TX	Zip Code 78714-2226		
Purpose of Expenditure See 12-31 and Jan IEs		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Transaction ID : <b>E3885C0A9C6144F99A7F</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span>	
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">144101.47</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;">10508.77</span>		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Dathan Voelter</u> <div style="text-align: right;">[Electronically Filed]</div>			Date <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYYYY</span> <b>09 / 29 / 2016</b>		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 116 OF 132  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	
Full Name of Payee <b>Rigel Strategies LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 23 / 2016</b>	
Mailing Address 3948 Legacy Drive Ste 106-282		Amount 30070.00	
City Plano	State TX	Zip Code 75023-8300	Transaction ID : <b>E92C148F54C4E4509BDD</b>
Purpose of Expenditure PAC Radio Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 23 / 2016</b>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>GA</b>	
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
Calendar Year-To-Date Per Election for Office Sought		2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>Thomas Graphics, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 23 / 2016</b>	
Mailing Address PO Box 142226		Amount 8140.63	
City Austin	State TX	Zip Code 78714-2226	Transaction ID : <b>E074659EA5C5D4C19931</b>
Purpose of Expenditure 3323.5, 4817.13 IEs	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Rafael Edward "Ted" Cruz		Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
Calendar Year-To-Date Per Election for Office Sought		2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		38210.63	
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶			
(c) TOTAL Independent Expenditures.....▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Dathan Voelter</i>		Date MM / DD / YYYY <b>09 / 29 / 2016</b>	
		[Electronically Filed]	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 117 OF 132  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00575415</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>					
Full Name of Payee <b>Facebook</b>			<input checked="" type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 10 / 2016</div>		
Mailing Address 601 Willow Rd Bldg 10			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">3753.84</div>		
City Menlo Park		State CA	Zip Code 94025-2618		<b>Transaction ID : E0FD74B6F0FDD40FF8AE</b>
Purpose of Expenditure Digital Media Production/Placement		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 09 / 2016</div>	
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: 00 <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: SC		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Campaign Data Solutions, LLC</b>			<input checked="" type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 16 / 2016</div>		
Mailing Address 7740 Tinted Mesa Ct			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">5441.30</div>		
City Las Vegas		State NV	Zip Code 89149-6438		<b>Transaction ID : EB579773EBCFC49C4BAI</b>
Purpose of Expenditure PAC Printing		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 16 / 2016</div>	
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: 00 <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: NV		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">0.00</div>		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> </div>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Dathan Voelter</i>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 29 / 2016</div> <div style="text-align: center;">[Electronically Filed]</div>		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 118 OF 132  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>					
Full Name of Payee <b>Campaign Data Solutions, LLC</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 7740 Tinted Mesa Ct			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">16</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>		
City Las Vegas		State NV	Zip Code 89149-6438		Amount <span style="border: 1px solid black; padding: 2px;">1800.00</span>
Purpose of Expenditure PAC Radio Advertising		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Transaction ID : EFE4D8546A2A04750A6E Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">16</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>	
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate			District: 00 State: NV		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">169235.23</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Broken Arrow Wear</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 4133 Merle Hay Rd			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">17</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>		
City Des Moines		State IA	Zip Code 50310-1316		Amount <span style="border: 1px solid black; padding: 2px;">9959.76</span>
Purpose of Expenditure PAC Printing - See Amex IE 2-17-16 Debt Payment		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Transaction ID : E9178A7422B694C1A807 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;"></span> / <span style="border: 1px solid black; padding: 2px;"></span> / <span style="border: 1px solid black; padding: 2px;"></span>	
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate			District: 00 State: IA		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">192805.47</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶					<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶					<span style="border: 1px solid black; padding: 2px;"></span>
(c) TOTAL Independent Expenditures..... ▶					<span style="border: 1px solid black; padding: 2px;"></span>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Dathan Voelter			Date <span style="border: 1px solid black; padding: 2px;">09</span> / <span style="border: 1px solid black; padding: 2px;">29</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 119 OF 132  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>					
Full Name of Payee <b>Thomas Graphics, Inc.</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address PO Box 142226			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">18</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>		
City Austin		State TX	Zip Code 78714-2226		Amount <span style="border: 1px solid black; padding: 2px;">10653.36</span>
Purpose of Expenditure PAC Printing		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Transaction ID : <b>E08E03312BBBA4A22B71</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">01</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>	
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate			District: <u>00</u> State: <u>SC</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">224595.23</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Thomas Graphics, Inc.</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address PO Box 142226			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">18</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>		
City Austin		State TX	Zip Code 78714-2226		Amount <span style="border: 1px solid black; padding: 2px;">4817.13</span>
Purpose of Expenditure PAC Printing		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Transaction ID : <b>EC25C953043C744F386F</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">18</span> / <span style="border: 1px solid black; padding: 2px;">2016</span>	
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate			District: <u>00</u> State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">169235.23</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶					<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶					<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶					<span style="border: 1px solid black; padding: 2px;"></span>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Dathan Voelter</i>			Date <span style="border: 1px solid black; padding: 2px;">09</span> / <span style="border: 1px solid black; padding: 2px;">29</span> / <span style="border: 1px solid black; padding: 2px;">2016</span> [Electronically Filed]		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 120 OF 132  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00575415</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>					
Full Name of Payee <b>ABC Signs</b>			<input checked="" type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>		
Mailing Address 5851 LaRue Steiner Rd			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>		
City Theodore		State AL	Zip Code 36582-1746		Transaction ID : E54D148AD6C914D4DA7D
Purpose of Expenditure PAC Sign Printing - See Amex 2-17			Category/Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House    District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: AL
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Thomas Graphics, Inc.</b>			<input checked="" type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>		
Mailing Address PO Box 142226			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>		
City Austin		State TX	Zip Code 78714-2226		Transaction ID : E0B35958ABD9E46C5B3F
Purpose of Expenditure PAC DVD Production			Category/Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House    District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: SC
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶					<div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶					<div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶					<div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Dathan Voelter			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>		
			[Electronically Filed]		



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 121 OF 132  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00575415</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>					
Full Name of Payee <b>Penny Pockets</b>			<input checked="" type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>		
Mailing Address    502 Bedford			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 1625.00		
City    State    Zip Code Fall River    MA    02720-4855		Transaction ID : <b>EFE520CCE1E8F41A5B51</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>			
Purpose of Expenditure PAC Printing - See Amex 2-17		Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div>			
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>MA</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 0.00			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>Left Hand Design</b>			<input checked="" type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>		
Mailing Address    7233 Manchaca Rd #37			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 166.71		
City    State    Zip Code Austin    TX    78745-5293		Transaction ID : <b>E0DA95624B1454676A51</b> Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>			
Purpose of Expenditure PAC Graphic Design - See 1-13 IE Payment		Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div>			
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>MA</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 0.00			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 0.00		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Dathan Voelter</i>			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> <b>[Electronically Filed]</b> 09 / 29 / 2016		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Express Printing</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 18 / 2016</b>	
Mailing Address 192 Anawan		Amount 1062.50		
City Fall River	State MA	Zip Code 02721-1562	Transaction ID : EA231B8B2DE024CA0BA5	
Purpose of Expenditure PAC Printing - See Amex 2-17		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 17 / 2016</b>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MA	
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Campaign Sidekick</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 19 / 2016</b>	
Mailing Address 1550 Old Annetta		Amount 3738.45		
City Aledo	State TX	Zip Code 76008-3855	Transaction ID : ED901CEB17711481790E	
Purpose of Expenditure Robo Calls - See Amex 2-17		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 19 / 2016</b>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought		224595.23	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Dathan Voelter

[Electronically Filed]

Date

MM / DD / YYYY  
**09 / 29 / 2016**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 123 OF 132  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y Y Y</span>			
Full Name of Payee <b>Campaign Data Solutions, LLC</b>		<input checked="" type="checkbox"/> Memo Item	
Mailing Address <b>7740 Tinted Mesa Ct</b>		Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">02 / 22 / 2016</span>	
City <b>Las Vegas</b>	State <b>NV</b>	Zip Code <b>89149-6438</b>	Amount <span style="border:1px solid black; padding:2px;">2595.60</span>
Purpose of Expenditure <b>PAC Printing</b>		Category/Type <span style="border:1px solid black; padding:2px;"></span>	Transaction ID : <b>ED751489DBE0B4A42955</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">02 / 23 / 2016</span>
Name of Federal Candidate <b>Rafael Edward "Ted" Cruz</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">169235.23</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>AGE Graphics</b>		<input checked="" type="checkbox"/> Memo Item	
Mailing Address <b>678 Township Rd 297</b>		Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">02 / 23 / 2016</span>	
City <b>Little Hocking</b>	State <b>CO</b>	Zip Code <b>45742</b>	Amount <span style="border:1px solid black; padding:2px;">6590.00</span>
Purpose of Expenditure <b>PAC Signs</b>		Category/Type <span style="border:1px solid black; padding:2px;"></span>	Transaction ID : <b>E9D0736D49F5249B8A03</b> Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">02 / 23 / 2016</span>
Name of Federal Candidate <b>Rafael Edward "Ted" Cruz</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">0.00</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		<span style="border:1px solid black; padding:2px;">0.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶		<span style="border:1px solid black; padding:2px;"></span>	
(c) TOTAL Independent Expenditures.....▶		<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Dathan Voelter</i>		Date <span style="border:1px solid black; padding:2px;">09 / 29 / 2016</span>	
		[Electronically Filed]	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 124 OF 132  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Campaign Data Solutions, LLC</b>			<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02 / 23 / 2016</span>	
Mailing Address 7740 Tinted Mesa Ct				Amount <span style="border: 1px solid black; padding: 2px;">990.80</span>	
City Las Vegas	State NV	Zip Code 89149-6438		Transaction ID : E9AD79A5D5B2D4BEEBE	
Purpose of Expenditure PAC Printing		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">02 / 23 / 2016</span>	
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">169235.23</span>				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Thomas Graphics, Inc.</b>			<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02 / 23 / 2016</span>	
Mailing Address PO Box 142226				Amount <span style="border: 1px solid black; padding: 2px;">274.74</span>	
City Austin	State TX	Zip Code 78714-2226		Transaction ID : E67A0BA8E607043F88B9	
Purpose of Expenditure PAC Mailing		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">02 / 23 / 2016</span>	
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">169235.23</span>				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Dathan Voelter

[Electronically Filed]

Signature

Date

09 / 29 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 125 OF 132  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Thomas Graphics, Inc.</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 23 / 2016</b>	
Mailing Address PO Box 142226		Amount <b>1020.03</b>		
City Austin	State TX	Zip Code 78714-2226	Transaction ID : <b>E5D64606AEC45403BAE4</b>	
Purpose of Expenditure PAC Mailing		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 23 / 2016</b>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OK</u>	
Calendar Year-To-Date Per Election for Office Sought		<b>12433.45</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Thomas Graphics, Inc.</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 23 / 2016</b>	
Mailing Address PO Box 142226		Amount <b>2936.92</b>		
City Austin	State TX	Zip Code 78714-2226	Transaction ID : <b>EA5FDF412FDC94455A73</b>	
Purpose of Expenditure PAC Mailing		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 23 / 2016</b>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought		<b>0.00</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>0.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Dathan Voelter

[Electronically Filed]

Date

MM / DD / YYYY  
**09 / 29 / 2016**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 126 OF 132  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		

Full Name of Payee <b>Campaign Data Solutions, LLC</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02 / 23 / 2016</span>	
Mailing Address 7740 Tinted Mesa Ct			Amount <span style="border: 1px solid black; padding: 2px;">6157.73</span>	
City Las Vegas	State NV	Zip Code 89149-6438	Transaction ID : <b>EE703C6F96B0C4E7F983</b>	
Purpose of Expenditure PAC Printing	Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">02 / 23 / 2016</span>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">169235.23</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Thomas Graphics, Inc.</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">02 / 23 / 2016</span>	
Mailing Address PO Box 142226			Amount <span style="border: 1px solid black; padding: 2px;">792.66</span>	
City Austin	State TX	Zip Code 78714-2226	Transaction ID : <b>E478285EBBC3847DA91C</b>	
Purpose of Expenditure Unused Printing Material	Category/Type <span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;"></span>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">152242.10</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"></span>
(c) TOTAL Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Dathan Voelter

[Electronically Filed]

Date

09 / 29 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 127 OF 132  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y Y Y</span>			
Full Name of Payee <b>Campaign Sidekick</b>		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 1550 Old Annetta		Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">23</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City Aledo		State TX	
Zip Code 76008-3855		Amount <span style="border:1px solid black; padding:2px;">3096.73</span>	
Purpose of Expenditure PAC Robo Calls - Only IE this Date		Category/Type <span style="border:1px solid black; padding:2px;"></span>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
<span style="border:1px solid black; padding:2px;">169235.23</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>Campaign Sidekick</b>		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 1550 Old Annetta		Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">02</span> / <span style="border:1px solid black; padding:2px;">28</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
City Aledo		State TX	
Zip Code 76008-3855		Amount <span style="border:1px solid black; padding:2px;">3173.66</span>	
Purpose of Expenditure PAC Robo Calls		Category/Type <span style="border:1px solid black; padding:2px;"></span>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OK</u>	
<span style="border:1px solid black; padding:2px;">12433.45</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		<span style="border:1px solid black; padding:2px;">0.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures .....		<span style="border:1px solid black; padding:2px;"></span>	
(c) TOTAL Independent Expenditures.....		<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Dathan Voelter</i>		Date <span style="border:1px solid black; padding:2px;">09</span> / <span style="border:1px solid black; padding:2px;">29</span> / <span style="border:1px solid black; padding:2px;">2016</span>	
		[Electronically Filed]	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 128 OF 132  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	
Full Name of Payee <b>SirSpeedy</b>		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 733 Marquette Avenue		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 28 / 2016	
City Minneapolis	State MN	Zip Code 55402-2309	Amount 937.64
Purpose of Expenditure PAC Printing		Category/ Type	Transaction ID : EA2234DFAC0BC4EF1891 Date of Disbursement or Obligation MM / DD / YYYY 02 / 28 / 2016
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MN
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>Target Marketing</b>		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 520 Main Street		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 28 / 2016	
City Broken Arrow	State OK	Zip Code 74012	Amount 558.84
Purpose of Expenditure PAC Printing		Category/ Type	Transaction ID : EB2D7D79C5B3D4E1D82F Date of Disbursement or Obligation MM / DD / YYYY 02 / 28 / 2016
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OK
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Dathan Voelter		[Electronically Filed]	
Signature		Date MM / DD / YYYY 09 / 29 / 2016	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 129 OF 132  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border:1px solid black; padding:2px;">M M / D D / Y Y Y Y Y Y</span>			
Full Name of Payee <b>Facebook</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">02 / 28 / 2016</span>
Mailing Address 601 Willow Rd Bldg 10		Amount <span style="border:1px solid black; padding:2px;">5074.21</span>	
City Menlo Park	State CA	Zip Code 94025-2618	<b>Transaction ID : EE0DB1619F47F4087993</b>
Purpose of Expenditure Digital Media Production/Placement		Category/ Type <span style="border:1px solid black; padding:2px;"></span>	Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">02 / 28 / 2016</span>
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OK</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">12433.45</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>Campaign Sidekick</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border:1px solid black; padding:2px;">02 / 28 / 2016</span>
Mailing Address 1550 Old Annetta		Amount <span style="border:1px solid black; padding:2px;">2514.53</span>	
City Aledo	State TX	Zip Code 76008-3855	<b>Transaction ID : EEB17479DF74A4B51800</b>
Purpose of Expenditure PAC Robo Calls		Category/ Type <span style="border:1px solid black; padding:2px;"></span>	Date of Disbursement or Obligation <span style="border:1px solid black; padding:2px;">02 / 28 / 2016</span>
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OK</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border:1px solid black; padding:2px;">12433.45</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		<span style="border:1px solid black; padding:2px;">0.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶		<span style="border:1px solid black; padding:2px;"></span>	
(c) TOTAL Independent Expenditures.....▶		<span style="border:1px solid black; padding:2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Dathan Voelter</i>		Date <span style="border:1px solid black; padding:2px;">09 / 29 / 2016</span> <i>[Electronically Filed]</i>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 130 OF 132  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00575415</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>			
Full Name of Payee <b>Facebook</b>		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 28 / 2016</div>	
Mailing Address 601 Willow Rd Bldg 10		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">5074.21</div>	
City Menlo Park	State CA	Zip Code 94025-2618	<b>Transaction ID : EC58A17C56ADF44BD981</b> Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 28 / 2016</div>
Purpose of Expenditure Digital Media Production/Placement		Category/ Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: GA <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">30070.00</div>		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	
Full Name of Payee <b>RiverCity Print &amp; Imaging, Inc.</b>		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 28 / 2016</div>	
Mailing Address 11511 Huron Lane		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">560.61</div>	
City Little Rock	State AR	Zip Code 72211-1846	<b>Transaction ID : E5FB110E62BCB49568CC</b> Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 28 / 2016</div>
Purpose of Expenditure PAC Printing		Category/ Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	
Name of Federal Candidate Rafael Edward "Ted" Cruz		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: AR <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">0.00</div>		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">0.00</div>	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	
(c) <b>TOTAL</b> Independent Expenditures..... ▶		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Dathan Voelter</i>		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 29 / 2016</div> <i>[Electronically Filed]</i>	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 131 OF 132  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00575415
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Campaign Sidekick</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 28 / 2016</b>
Mailing Address 1550 Old Annetta			Amount <b>793.42</b>
City Aledo	State TX	Zip Code 76008-3855	<b>Transaction ID : E6E4DFC0C7D8E49309D3</b>
Purpose of Expenditure PAC Robo Calls	Category/ Type		Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 28 / 2016</b>
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AL</u>
Calendar Year-To-Date Per Election for Office Sought		<b>0.00</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Facebook</b>		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 28 / 2016</b>
Mailing Address 601 Willow Rd Bldg 10			Amount <b>5074.21</b>
City Menlo Park	State CA	Zip Code 94025-2618	<b>Transaction ID : EE10104C6847F4277855</b>
Purpose of Expenditure Digital Media Production/Placement	Category/ Type		Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 28 / 2016</b>
Name of Federal Candidate Rafael Edward "Ted" Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought		<b>0.00</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>0.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Dathan Voelter

[Electronically Filed]

Date

MM / DD / YYYY  
**09 / 29 / 2016**

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 132 OF 132  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Keep the Promise PAC</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00575415</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>					
Full Name of Payee <b>Facebook</b>			<input checked="" type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 28 / 2016</div>		
Mailing Address 601 Willow Rd Bldg 10			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">5074.21</div>		
City Menlo Park		State CA	Zip Code 94025-2618		<b>Transaction ID : E8084B97983334F3A885</b>
Purpose of Expenditure Digital Media Production/Placement		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">02 / 28 / 2016</div>	
Name of Federal Candidate Rafael Edward "Ted" Cruz			<input checked="" type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: 00 <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State: AR		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">0.00</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee			<input type="checkbox"/> Memo Item    Date of Public Distribution/Dissemination		
Mailing Address			Amount		
City		State	Zip Code		Date of Disbursement or Obligation
Purpose of Expenditure		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	
Name of Federal Candidate			<input type="checkbox"/> Support    Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶ <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">0.00</div>					
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>					
<b>(c) TOTAL</b> Independent Expenditures..... ▶ <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">172236.47</div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Dathan Voelter			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 29 / 2016</div>		
[Electronically Filed]					